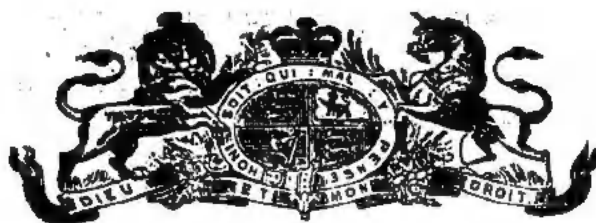

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SUPPLEMENT TO The Calcutta Gazette.

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OFFICIAL PAPERS.

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Reports on the Epizootic Diseases of Cattle in Lower Bengal.

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- I.—From J. D. Sim, Esq., Secretary to the Government of Fort St. George, to the Secretary to the Government of Bengal, No. 1932, dated 27th October 1863.
 1. From J. J. Minchin, Esq., Collector of Kurnool, to W. Hudleston, Esq., Secretary to the Board of Revenue, No. 107, dated 16th July 1863.
 2. From Captain J. Nelson, to J. J. Minchin, Esq., Collector, Kurnool, dated Rajendrapooram, 8th July 1863.
- II.—From Major W. Agnew, Officiating Commissioner of Assam, to the Junior Secretary to the Government of Bengal, No. 4, dated 19th January 1864.
- III.—From W. Gordon Young, Esq., Commissioner of Chittagong, to the Officiating Secretary to the Government of Bengal, No. 11, dated 20th January 1864.
- IV.—From C. F. Montresor, Esq., Commissioner of Burdwan, to the Junior Secretary to the Government of Bengal, No. 13, dated 13th February 1864.
 1. From J. W. Terry, Esq., Mofussil General Manager of the Southern Division, of Messrs. R. Watson and Co., to A. Smith, Esq., Officiating Magistrate of Midnapore, dated 25th January 1864.
 2. From John Stalkart, Esq., Ghoseery, to E. C. Craster, Esq., Magistrate of Howrah, dated 12th January 1864.
- V.—From A. Money, Esq., c. b., Commissioner of Bhaugulpore, to the Junior Secretary to the Government of Bengal, No. 48, dated 8th February 1864.
- VI.—From R. J. Scott, Esq., Commissioner of Rajshahye, to the Junior Secretary to the Government of Bengal, No. 24Ct., dated 22nd February 1864.
- VII.—From G. F. Cockburn, Esq., Commissioner of Patna, to the Officiating Secretary to the Government of Bengal, No. 40, dated 27th February 1864.
 1. From C. J. Jackson, Esq., Civil Surgeon, Sarun, to J. J. Grey, Esq., Magistrate and Collector of Sarun, No. 33, dated 8th February 1864.

2. Memorandum from J. J. Grey, Esq., Magistrate and Collector of Saugor, No. 163, dated 22nd February 1864.
 3. From A. Hope, Esq., Collector of Behar, to the Commissioner of Patna, No. 1238, dated 6th February 1864.
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 5. From A. M. Cole, Esq., Deputy Magistrate of Barh, to H. W. Alexander, Esq., Magistrate of Patna, No. 189, dated 7th December 1863.
 6. From Major J. Emerson, Cantonment Joint-Magistrate of Dinapore, to the Magistrate of Patna, No. 218, dated 9th December 1863.
 7. From Captain Chambers, Deputy Assistant Commissary General, Dinapore, to Major J. Emerson, Cantonment Joint-Magistrate of Dinapore, No. 457, dated 8th December 1863.
- VIII.—From A. H. Blechynden, Esq., Secretary to the Agricultural and Horticultural Society, to S. C. Bayley, Esq., Junior Secretary to the Government of Bengal, dated 1st February 1864.
1. Minute by Dr. J. B. Barry.
 2. Extract of a letter from A. Sawers, Esq., to A. Grote, Esq., dated Culna, 16th December 1864.
- IX.—From H. L. Oliphant, Esq., Joint-Magistrate of Jessore, to the Collector of Jessore, No. 17, dated 13th January 1864.
- X.—From Dr. C. Palmer, Presidency Surgeon, to S. C. Bayley, Esq., Junior Secretary to the Government of Bengal, dated 7th October 1865.
- XI.—From W. A. Green, Esq., M. D., Officiating Principal Inspector-General, Medical Department, No. 396A, dated 6th July 1866.
1. From J. B. Roberts, Esq., Junior Magistrate of Police, Northern Division, and Coroner, to J. Sutherland, Esq., M. D., Officiating Deputy Inspector-General of Hospitals, dated Raneegunge, 29th May 1866.
 2. From N. Jackson, Esq., M. D., Civil Medical Officer, Balasore, to the Deputy Inspector-General of Hospitals, Barrackpore, No. 64.
- XII.—From Lieutenant-Colonel H. Hopkinson, Agent to the Governor General, North-East Frontier, and Commissioner of Assam, to the Secretary to the Government of Bengal, No. 322, dated 11th August 1866.
- XIII.—From C. T. Buckland, Esq., Commissioner of the Dacca Division, to the Secretary to the Government of Bengal, No. 685, dated 14th August 1866.
1. From C. T. Buckland, Esq., Commissioner of the Dacca Division, to the Secretary to the Government of Bengal, No. 197, dated 28th September 1866.
- XIV.—From Lieutenant-Colonel W. Agnew, Officiating Commissioner of Cooch Behar and the Dooars, to Officiating Under-Secretary to the Government of Bengal, No. 1238, dated 29th August 1866.
- XV.—From J. W. Dalrymple, Esq., Commissioner of the Patna Division, to the Secretary to the Government, No. 277, dated 11th October 1866.
1. From C. C. Stevens, Esq., Assistant Collector of Buxar, to the Collector of Shahabad, No. 86, dated 8th September 1866.

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1. From F. G. Millett, Esq., Magistrate of Tipperah, to the Commissioner of the Chittagong Division, No. 669, dated 18th August 1866.
 2. From same to same, No. 453, dated 29th May 1866.
 3. From Baboo Bhugwan Chunder Bose, Deputy Magistrate, Nassirnuggur, to J. A. Greene, Esq., M. D., Medical Officer of Tipperah, No. 56, dated 7th May 1866.
- XVII.**—From R. P. Jenkins, Esq., Officiating Commissioner of the Burdwan Division, to the Secretary to the Government of Bengal, No. 141C., dated 1st November 1866.
- XVIII.**—From A. Money, Esq., C. B., Commissioner of the Bhaugulpore Division, to the Under-Secretary to the Government of Bengal, No. 333, dated 6th November 1866.
1. From H. M. Herrold, Esq., to Major B. Reid, Deputy Commissioner of Darjeeling, dated 15th August 1866.
- XIX.**—From H. L. Dampier, Esq., Commissioner of the Nuddea Division, to the Secretary to the Government of Bengal, No. 192, dated 30th October 1866.
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1. From Baboo Kallichurn Ghose, Deputy Magistrate of Satkheerah, to the Magistrate of the 24-Pergunnahs, No. 40, dated 3rd October 1866.
- XXI.**—Memorandum from W. Gordon Young, Esq., Commissioner of the Chittagong Division, No. 323, dated 9th November 1866.
1. From W. D. Pratt, Esq., Officiating Superintendent of Police, Tipperah, to the Magistrate of Tipperah, No. 118, dated 20th September 1866.
 2. From J. A. Greene, Esq., M. D., Medical Officer, to the Magistrate of Tipperah, No. 153, dated 31st October 1866.
- XXII.**—From T. E. Ravenshaw, Esq., Officiating Commissioner of the Cuttack Division, to the Secretary to the Government of Bengal, No. 539, dated 17th November 1866.
- XXIII.**—From Lieutenant-Colonel E. J. Dalton, Commissioner of Chota Nagpore, to A. Mackenzie, Esq., Officiating Under-Secretary to the Government of Bengal, No. 96, dated 14th January 1867.
1. From H. L. Oliphant, Esq., Deputy Commissioner of Lohardugga, to the Commissioner of Chota Nagpore, No. 609, dated 19th October 1866.
 2. From S. R. Forbes, Esq., Assistant Commissioner of Palamow, to H. L. Oliphant, Esq., Deputy Commissioner of Lohardugga, No. 111, dated 17th September 1866.
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 4. From Lieutenant R. C. Money, Deputy Commissioner of Maunbhoom, to the Commissioner of Chota Nagpore, No. 915, dated 22nd October 1866.
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- XXIV.**—From W. J. F. Robinson, Esq., Officiating Commissioner of Circuit, Rajshahye Division, to the Secretary to the Government of Bengal, No. 26, dated 18th January 1867.
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XXVI.—On the Contagious disease called *Dosento*, which attacks the cattle of Bengal, by H. Piddington, Esq., Transactions of Agricultural and Horticultural Society, Vol. III., p. 128.

XXVII.—Additional remarks on the above ditto, Vol. V., p. 217.

XXVIII.—Remarks on the prevailing epidemic in Ceylon in 1842, by J. Lambert, Journal of A. & H. Society, Vol. I., p. 235.

XXIX.—Correspondence relative to a murrain among cattle which recently prevailed in parts of Assam, Journal, Vol. XIII., p. 270.

XXX.—Dobson on the diseases of the ox.

XXXI.—MacPherson's "Cholera in its home."

XXXII.—Aitken's "science and practice of medicine."

XXXIII.—A System of Medicine, Edited by J. Russell Reynolds, M. D., &c.

XXXIV.—Manual of British Rural Sports by "Stonehenge."

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2. Dr. A. Imthurn, Civil Medical Officer, Tezpur, to the Deputy Commissioner, Zillah Durrung, No. 50, dated 10th September 1867.

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REPORT ON THE EPIZOOTIC DISEASES OF CATTLE IN LOWER BENGAL.

I.—History.

The earliest notice which I have found of Epizootic Diseases among cattle in Lower Bengal is by H. Piddington, Esquire,(1) whose communication is dated 13th July 1836. He calls the disease *Bosonto*; surmises that it is a species of contagious dysentery; states that his own cattle were attacked three or four times in the course of seven or eight years; gives a slight sketch of the symptoms, and details a method of treatment which he recommends with confidence.

He further states that in the Campaign of Ava this disease was so severe among the Commissariat cattle that it interfered with the advance of the Army. This removes the disease about twelve years back.* Mr. Piddington talks of "the Bosonto which attacks the cattle of Bengal," as of a well known and general disease. The next notice of cattle disease, on a large scale which I have been able to obtain, is of an epizootic in Ceylon in 1842.(2)

The disease in this case is not named; but the notes of it are very interesting, and will be alluded to in the sequel.

In the year 1853 cattle disease was very prevalent and fatal in Assam.(3) It has continued to rage at intervals in the various districts of that Division.

In 1861 an eruptive disease of an epizootic character affected the municipality cattle of Calcutta so severely that a Veterinary Surgeon was appointed to investigate its nature and treatment.(4)

In 1863 the attention of the Madras Government was called by Captain Nelson to a very general and fatal eruptive epizootic which had carried off hundreds of cattle.

The Government of Bengal was addressed on the subject.(5) and a Circular calling for information (No. 5331, dated 20th November 1863) was addressed to all the Commissioners of the Divisions of Bengal. This Circular elicited a number of interesting and important reports.(6)

These reports, which were published in a supplement to the *Calcutta Gazette* of 12th March 1864, and included information from nearly every district in Bengal Proper, render it evident that cattle diseases of an epizootic character have periodically raged throughout the Province from a time beyond recollection. In the absence of any attention having been directed to the subject, or of any records, it is impossible now to fix the time of their origin or to trace their progress; but there is every reason to believe that most, if not all, of them are of indigenous growth, and have existed as long as there have been cattle to be affected or conditions of climate and soil resembling the present conditions.†

In January 1864 an exhibition of cattle was held at Alipore, and there cattle disease of a virulent and fatal type broke out and raged for three months. This still further aroused the attention of Government, and Dr. C. Palmer was appointed to draw up a special report on the subject. After making the necessary inquiries and investigations, Dr. Palmer presented his able and interesting report(7) in October 1866. This report was printed and circulated throughout Bengal with a Circular calling for further information (No. 3468 of 16th July 1866).

This elicited a second series of report (XII.—XXV.) which contain much interesting matter; they conclusively show that in the various epizootics, which so extensively prevail throughout Bengal, we have a subject of intense interest demanding careful and constant study; that the mortality which occurs among cattle yearly from this cause is a most

* Dr. McPherson (XXXI. p. 14) alludes to an epizootic disease of cattle in the army in 1817, and Mr. Gudge, Veterinary Surgeon, ascertained in 1866, by careful enquiry, that cattle diseases have been prevalent in British Burmah for forty or sixty years at intervals (XXXVI. p. 4).

† There is however, in the fact of the increase of the price of cattle in recent years mentioned by Mr. Oliphant (IX.) and others, a reason for thinking that the loss of cattle has been greater in late years than formerly, but that increase may depend upon other causes, and may be but an instance of the general rise of prices which have been steadily advancing during the last 50 years in this country.

The impression, however, that cattle diseases have been more general, virulent, and fatal of late years is a very general one. Mr. Gudge, Veterinary Surgeon, in his report of cattle diseases in British Burmah, is decidedly of this opinion, which is based upon the testimony of the natives. There can be no doubt of the fact of the increase of price and the greater attention which these diseases have of late attracted.

material consideration, bearing on the most intimate interests of the people; that methods of providing against the appearance of such epizootics, or cutting them short after they have appeared, or of treating the affected animals are very various and very inefficacious, and that among the natives themselves much superstition and apathy exist on this subject. In the following pages all the information which has been collected on the subject of cattle diseases will be presented in a methodical and digested form. I shall in order treat of—

1st.—The varieties of the diseases observed and their names.

2nd.—Of their geographical distribution.

3rd.—Of their modes of origin and spread.

4th.—Of the causation.

5th.—Of the symptoms of the principal forms of disease.

6th.—Of the *post mortem* appearances.

7th.—Of the Pathology.

8th.—Of the Diagnosis.

9th.—Of the Prognosis and,

10th.—Of the treatment, preventive and curative.

Under each of these heads I shall endeavor to indicate what points have been already pretty clearly made out, and what still remain for investigation.

Owing to the action of Government in the matter the attention of officers every where is now constantly directed to the subject, and out-breaks of disease among cattle are watched and reported on with nearly the same care as epidemics of disease among men. Eventually a large mass of important facts will be accumulated which will clear up points now doubtful: but it will greatly assist such a consummation if the facts already collected are presented in a well arranged and reasoned form.

II.—Varieties and Names.

Owing to several causes, among them principally the want of any uniform veterinary nomenclature, the non-professional character of the reporters, the partial descriptions of symptoms, and the varieties of dialect in different districts, it is not an easy matter to determine what different names apply to the same disease in different districts, or in some cases what precise disease is meant and expressed by a particular name.

The varieties of diseases enumerated in the various reports, however, come under one of the following heads.

A. Epizootic Diseases.

1. Eruptive.

2. Not eruptive.

B. Non-Epizootic Diseases.

1. General.

2. Local.

It is to the diseases which are included under the former head that attention has hitherto been mainly directed. Those coming under the second head, though disguised under a variety of fanciful names, are well known, and their nature and treatment is definitely laid down in veterinary works. They are mostly local affections, produced by strictly local causes, connected with the immediate conditions of life of the animal and most of them amenable to simple modes of treatment.

A.—Of the epizootic class of diseases, those accompanied by an eruption occupy a more prominent position in the official papers than those without an eruption.

Of these diseases two varieties at least can be distinguished. They are perhaps different degrees of the same disease, but their severity and mortality are so distinct that for practical purposes it is well to separate them.

1a. The first is the "foot and mouth disease" of English veterinary medicine.

It is known in different districts by various names, most of them derived from *khoo*, a hoof. It is called *Khoo* (Rajshahye) (1) *Khorafa* or *Khang* (Shahabad) (2) *Zairkhara* (Tirhoot) *Khurpakka* (Buxar) *Khoratia* (Darjeeling) (3) *Kherak* (Lohardugga) (4) *Homsa* (Midnapore) (5) *Soh Lu* (Durrang) (6) and *Khorakile* (Jessore). It is probable that besides the epizootic disease of the mouth and foot called *eczema*

epizootics, any diseased condition of the hoof will be included under these terms. Cattle in India frequently suffer from strictly local affections of the hoof caused by foreign bodies, wet, &c., corresponding to the English "foul in the foot" which ought carefully to be distinguished from the epizootic disease.

b. By far the most important disease of this group is the more serious affection known by the various names of *Gootee*, *Doshunto*, *Mata*, *chechhal* (Bhangulpore and Sarun) (7) *Setala*, *Mardrishti* (Jessore) (8) *Takrooni* (Jessore and Rajshahye) (9) and *Markhee* (Dooars) (10). It is also alluded to as "the Murraia" "Small-pox" "Cow-pox" and Dr. Palmer (11) believes it to be the *Eczema* *Epizootica*

of Veterinary Surgeons.

14. Of the epizooties without any eruption the best known and most formidable is the disease most commonly known as *Puschima*. This disease is thought to be the same as the

(1) Locust. "Rinderpest" of Russia and Dr. Palmer(1) believes the "Calcutta epizootic" to have been a manifestation of this plague. It is some-

what difficult from the variety of names and imperfect descriptions to determine what terms are used to designate this disease in different Districts. The term *Puschima* is known throughout the Divisions of Nuddea and Burdwan. The words *reg* and *nuva* are sometimes appended to the term. In the Patna Division the same disease appears to go under

(2) IX. the name of *Dukha*, (Patna,) (2) *Hengaha* (Shahabad) and *Waghah* (Tirhoot). In Darjeeling this disease is called "*Dosalin*" or "the plague." (3) It is also known by the names of *jar* or *jarun*. *Burra-pera* (the great sickness) *Hureena* (Garbettah) (4) *Hurna* (Bhaugulpore) (5) (from a Bengalee word signifying mad or rabid, and prob-

ably expressive of the uneasy manifestations of an animal laboring under severe disease,) and in many places this disease from the similarity of its symptoms to those of Gootes is called by the same names.*

b. Another disease apparently of an epizootic character is ulcerated sore throat or *Golahar* (6) which is not uncommon, and seems to be the same disease as "thrush" or "blain". I observe that the disease has been very

prevalent in some parts of Madras during the past season.*

c. Some reports and names seem to indicate that cattle are subject to malarious fever. Of this nature the "*Perla rog*" and *Bakul-khar* of Beerbhoom (7) and the *Budla* of Dinagapore (8) seem to be.

d. Cattle would also seem to be subject to Diarrhoea and Dysentery, as distinct affections and not merely symptoms or sequels of other diseases.

The information on these last heads is defective and the subject demands further investigation.

15. It is exceeding difficult from the fanciful and various names, probably suggested by some particular symptom or manifestation, to determine what particular non epizootic disease is expressed by any of the very numerous terms (not far from 100) used by Goolias. In order to arrive at any useful or definite result, it would be necessary for the same person to make a searching investigation into the matter throughout the different districts of the province.

Some well marked diseases are however easily recognised. "Tympanitis "hoven" or "blown" is known by the terms *Poolbhugha* (9) and *Tepamina* (10). Rheumatism is expressed by "*Rosbat*" (11) Ring worm by "*Daud*" (11) Palsy by *Battussia* (11). Consumption or rather tuberculous disease of the organs of the nutrition by *Sookmina* (11).

More than these I have not been able to identify, and very much remains to be done in defining and reconciling the nosologies of different districts, which I suspect are very vague and various. In the succeeding remarks I shall confine myself entirely to the epizootic diseases.

III.—Geographical Distribution.

This will best appear from the accompanying table which I have prepared from the reports submitted to Government from the various divisions of Bengal. It shows that epizootic diseases of cattle are universal throughout the Province. The "foot and mouth disease" is reported to be prevalent in the districts of Shahabad (12),

(12) XV. Tirhoot (13), Rajshahye (14), 24-Pergunnahs (15), Jessore (16), (13) XV. Cuttack (17), Hazareebaugh (18), Lohardugga (19), and Midnapore (20). This list is probably far from representing the actual prevalence of this epizootic, but it sufficiently demonstrates how wide an area it effects.

The disease usually known by the name of Gootes may be said to be universal throughout Bengal. It is prominently alluded to in every one of the reports under analysis.

The epizootic known by the name of Puschima is most decidedly spoken of, and described in the Districts of Nuddea, 24-Pergunnahs, Jessore, Burdwan, Hooghly, and Howrah, but under other names the disease appears to prevail in Patna, Saran, Rajshahye, Rungpore, Bogra, Midnapore, Pooree, Nowgong, and Dajeejing.

* I have assumed the term to apply to internal ulcerations of the throat, but it is possible that external ulcers are meant. In fact, as will appear in the sequel, an occasional condition in the disease called gootes has been constituted a separate disease.

Table showing the Geographical Distribution of Epizootic diseases of Cattle in Bengal Proper.

DIVISIONS.	District.	PREVALENCE OF EPIZOOTICS.		Remarks on the kind of disease, &c.
		Prior to 1864.	To the beginning of 1867.	
I.—PATNA DIVISION	Patna	Not prevalent to any extent	Prevailed severely in 1864-65, a few cases in 1866.	Gootes; and "Dukula" probably puschima; and foot and mouth disease.
	Saran	Frequently prevail	Prevail in some parts of the District	Gootes. Pustules appear slightly and occasionally end "Waghah" (Puschima ?)
	Behar Shahabad	Known for six or seven years No disease observed	None since 1864 Known throughout the District	Gootes: pustules all over the body. Foot and mouth disease, Gootes, Hengaha, (Puschima ?) and others.
	Champaran	Prevailed since 1863	None since 1864	Apparently variola. Pustules, becoming confluent, described by Civil Assistant Surgeon.
	Tirhoot	No disease observed	Epizootics known	Foot and mouth disease, and Gootes.
II.—BRABHARPORE DIVISION	Bhadrupore	Prevail to a slight extent	Large numbers of cattle died in 1864; since then mortality has been slight	Gootes called "Herna" ... } A similar disease is known in the South Per-
	Monghyr	Ditto		Ditto ditto ... }
	Purneah	Ditto		Ditto called "Aga" ... }
	Rajshahye	Prevailed in 1866	None since 1864	Gootes, foot and mouth disease, and others.
	Patna	No disease reported	Prevailed since 1864	Puschima apparently.
III.—RAJSHAHYE DIVISION	Rangpore	Prevail annually to a great extent	Raged at intervals during 1865 and 1866.	"Small-pox" and Puschima.
	Bograh	No disease reported	Prevailed in May 1866	Puschima apparently.
	Dinagopore	Prevail annually to a great extent	None since 1864	"Small-pox."
	Malda	Prevail periodically with severity	Ditto	Gootes; Civil Surgeon describes pustules.
	Mooredahad	Prevail annually to a great extent	Ditto	"Small-pox."
IV.—DACCIA DIVISION	Dacca	No reports	No disease reported.	
	Furcedpore		Ditto.	
	Sylhet		Ditto.	
	Mymensing Backergunge		Ditto.	
V.—CHITTAGONG DIVISION	Chittagong	No disease observed	Very prevalent and fatal during 1865	"Gootes;" Civil Surgeon calls it "a species of severe fever."
	Tipperah	Prevalent for many years		"Gootes."
	Mookally	Frequently appear		Called "Mata" by Natives; no eruption observed by Civil Surgeon.
				"Gootes."
VI.—NUNDIA DIVISION	Nundia	Frequently appear	Ditto	Gootes and Puschima.
	El-Pargumab	Frequently prevalent	Very prevalent and fatal in 1865	Gootes, Puschima, and foot and mouth disease.
	Jessore	Prevail frequently and virulently	Ditto	Ditto

VII.—BUNDWAT DIVISION.	Bundwan	Best known for 20 or 30 years	None since 1864	"Gootee" and Puchima.
	Mooply	Prevail extensively	Prevail annually	Ditto ditto.
	Howrah	Break out every 3 or 4 years	None since 1864	Ditto ditto.
	Bancorah	Were virulent in 1860	Ditto ditto	"Gootee."
	Beebhoom	Appear periodically	Prevail during 1863 and 1866	Ditto.
	Midnapore	Very common	Prevail periodically	"Gootee" and "Acra" resembling Puchima, and foot and mouth disease.
VIII.—CHITLAGH	Cuttack	Of yearly occurrence	Artillery cattle attacked in 1866	Foot and mouth disease and "Gootee."
	Balasore	Prevailed in 1863	None since 1864	"Gootee."
	Pooner	Prevailed in 1864	Ditto ditto	Apparently Puchima.
	Hazareebagh	Frequently prevail	Ditto ditto	Foot and mouth disease and "Mata."
	Lehardugge	Common	Prevailed in 1865	"Gootee," foot and mouth disease and others.
IX.—CHOTA NAGPORE.	Manbhoom	Very prevalent in 1864	Prevailed in 1865 and 1866	"Gootee;" 22,000 head of cattle lost.
	Singbhoom	No information	Very prevalent in 1866	"A very virulent cow-pox."
	Stumbulpoore	No return	No return	
	Akyab	No return.		
	Ranuree	No return.		
X.—ARACON	Sandoway			
	Gowalparah	Prevailed virulently in 1863		"Gootee."
	Kamroop	Ditto ditto		Ditto.
	Nowgong	Prevailed virulently in 1863		Ditto.
	Seebaugur	Ditto ditto	None since 1864	"Small-pox."
XI.—AMAN	Durung	Prevailed during preceding 4 years		"Gootee."
	Debroogaur	Prevailed virulently in 1863		Ditto.
	Kassiah Hills	Ditto ditto	Prevailed in 1865	
	Cachar	No information		
	Darjeling	Ditto.	Prevailed extensively in the end of 1865	Disease called "Dowlin" or Plague. Puchima(?)

The information about other forms of disease is so fragmentary and imperfect, that I shall not discuss them. The subject of the distribution of epizootics from year to year in the Presidency and its Divisions and Districts is well worthy of attention and renewed inquiry.

IV.—Mode of origin and spread of Epizootics.

The information on this head throws itself into the following well established propositions:—

1. During the season when epizootics are apt to prevail, or in places in whose neighbourhood epizootic diseases are prevailing, sporadic cases are prone to occur.

(1) X. p. 1.
XVII. para. 7.
XXIX. para. 3 and 6.

This is abundantly illustrated in the official Reports. (1) The cases which occur in this way are generally of a mild description.

2. In advance or anticipation of an epizootic sporadic cases are also observed. The best illustration of this is given in the history of the Assam epizootic. (2) Two months before the epizootic actually appeared five cases were reported to have occurred on a farm.

(2) XXIX. p. 202.

3. When the epizootic actually breaks out, first one cow and then several are affected, till it spreads rapidly over the majority of the fold.

(3) X. p. 1.
(4) XVIII. 1.
(5) XXVIII.

This is the history of the Calcutta epizootic of 1864, as given by Dr. Palmer (3), of the Darjeeling epizootic of 1863 (4), and of the Ceylon epizootic of 1842. (5)

4. The cases which occur at the commencement of an epizootic are more virulent and fatal than those which take place towards the end.

(6) XXIX.
(7) X. p. 2.

This proposition is beyond dispute, and is illustrated by the Assam epizootic (6) and the Calcutta epizootic. (7)

5. Epizootics break out and prevail principally among herds of cattle. This is insisted on by Dr. Coates, (8) but is subject to the doubt arising from the fact that cattle are almost invariably herded in this country. Besides, the cases of several European gentlemen, (9) whose cattle were not herded in the strict meaning of the term and still suffered severely from prevailing epizootics, show that when the causes of the diseases are very ripe, it may attack cattle under any circumstances. Still there can be no doubt of the fact that, as crowds of men are more prone to be attacked by and succumb to epidemic influences (10), so herds of cattle are more apt to be attacked by and suffer from epizootics.*

(10) XXXI. p. 30.

6. After the disappearance of an epizootic, sporadic cases of a mild kind are observed. (11)

(12) XVII.
VI. VII. 3. &c.
(13) IV.
(14) XIX. para. 2.
(15) XII. para. 6.

7. Epizootics have a tendency to periodical return, and in the interval may prevail in a mild or mitigated form. The length of the interval is variously stated, every year, (12) every three or four years, (13) four or five years (14) and every ten or twelve years. (15)

The prevalence of a mild form of disease in the intervals of severe attack is testified by some observers. (16) While the fact of periodical recurrence is admitted by many. (17)†

(16) II.
VIII. 2. | (17) IV.
XXIII. 4. | VI.
XXV.

8. Epizootics when they break out generally rage for a definite period, and decline or disappear after the lapse of that time. Three months appears to be the average duration of epizootics in a particular place. The Calcutta epizootic of 1864 prevailed from January to April. (18)

(18) X. p. 2.

A severe epizootic at Nassirnuggur, Tipperah, is stated to have lasted three or four months (19), at Kurnool in Madras, the epizootic is said to have prevailed for three months. (20)

(19) XVI.
(20) I. 2.

In other cases, as in the Assam and Backergunge visitations, the disease was more protracted.

The fact of its general prevalence for three months is interesting when compared with the division of the year into period of three months, which Dr. Mc'herson has found the most convenient and significant arrangement in discussing the relation of cholera to seasons. (21) Besides the theory of the change of season, so altering the endemic influences of a locality as to render the specific influences of the fever poison inoperative, there is another probable explanation of the circumstance, namely, that three months is nearly the average time in which all animals susceptible of the epidemic influence are affected by it.

(21) XXXI. p. 6.

9. In a severe epizootic, while the great majority of cattle are susceptible of the influence and suffer from the disease, a certain proportion, small in proportion to the severity of the type of the disease, escape infection.‡

* "All the diseases are always more or less prevalent among the great cattle herds of Palanow." (XXIII. 2.)

† Mr. Gudgeon, Veterinary Surgeon, in his report of Cattle Disease (Fuehima) in British Burmah, remarks. "In some places it makes its appearance year after year, in others at intervals of 8, 6, 10, and 11 years. XXXVI. p. 4.

‡ This law also applies to localities as well as to cattle.

(1) XXX.

(2) XXXI. 1.
XX. XVIII. 1.

11. Occasionally the spread of the epizootic is observed to have a definite direction. In Assam it spread eastward.(3) In Backergunge it is also said to have proceeded eastward(4)*, while in the case of the Jessore epizootic of 1867 which I investigated personally it seemed to pursue a northerly course.(5)

12. In many severe epizootics, the origin and spread of epizootics was observed to coincide with the origin and spread of epidemics of fever and cholera among man. This was notably the case in Assam in 1853.(6) This simultaneous occurrence of epizootics and epidemics is a well known fact and is stated as one of the laws of epidemic influence by Dr. Aitken.(7)

13. Besides cattle, other animals, tame and wild, have been involved in severe epizootics. Lieutenant Gregory says that in Sebsaugor domestic animals alone were not attacked, as deer and other wild animals were found dead in the jungle with the same symptoms.(8) Dr. Coates says "that the disease (Gootee) is contagious among cattle, cows, buffaloes, sheep, goats, and even horses have it".(9) Mr. Stevens adds pigs to the list.(10) It is said to attack horses and other animals in the North-West.(11) Dr. Jackson says that buffaloes, male and female, bulls, cows, bullocks, sheep, and goats are liable to the disease.(12)† I was informed that during the epizootic which prevailed in the South of Jessore in 1866, wild pigs, deer, and buffaloes were found dead in unusually great numbers in the jungle. Dr. Palmer, who does not believe in the communicability to horses, gives a very remarkable instance in which two horses, apparently caught the disease by infection and died of an affection very similar to the Calcutta epizootic.(13)‡

14. While there is a strong probability of epizootics spreading by other agencies than infection, there are many remarkable instances on record of its importation by diseased animals. This will be more particularly discussed in the next Section.

15. A locality in which an epizootic has recently prevailed does not suffer so severely when visited a second time.(14)

These laws of the mode of origin and spread of epizootics apply equally to epidemics of disease among men. This will appear from a perusal of the excellent remarks of Dr. Aitken on the laws of endemic and epidemic influence, and the facts stated in the preceding paragraphs are familiar to the student of human medicine.

Accurate information upon the place and mode of origin of epizootics, the manner, direction, and rate of spread and generally on all the points summarized in the foregoing, is much wanted, and the exact relations of epizootics and epidemics have still to be worked out.

I shall here transcribe for the purpose of reference and comparison Dr. Aitken's principal conclusion.

Specific disease poisons.—The matter by which the specific miasmatic diseases are communicated and propagated is solely derived from the body of the similarly diseased human or animal being; for there, during the course of the specific disease, is the soil in which the specific poison is bred to multiply and propagate its kind.

Epidemic influences result from those condition or agencies peculiar to a locality which favor the development of various miasmatic diseases.

They become active through the following conditions, namely:—

1st.—The specific poisons are never totally in abeyance.

2nd.—The germs of specific diseases are always extant and develop under favorable conditions becoming epidemic influences.

3rd.—These diseases are characterised by alternations of slumber and activity, prevalence in one place, while neighbouring places are free and successive invasion of neighbouring places.

4th.—The specific morbid poison, which is a constant element, is capable of transmission from place to place, alternately breaking out and becoming dormant.

5th.—In large towns the fever poisons are always present, in country places they only now and then occur. When disease is developed in the latter places the ratio of persons or animals attacked is greater.

* In Sathernh. 24-Pergunnahs, it is also described as travelling eastward. (XX.)

† Major Lamb, Deputy Commissioner of Durrang, remarks that large numbers of cows, swine, fowls, ducks, and pigeons have been carried off this year (1867). (XXXV. 1.)

‡ Dr. McPherson (XXXI. p. 14) alludes to a disease among fowls, which has sometimes prevailed simultaneously with Small-Pox in Lower Bengal, but often quite independently of it. This disease is still very common in the district of Jessore, it affects hens and turkeys and prevails most in the hot weather. I have no facts showing its relation to other epizootics. It is called Gootee, &c., by the natives.

6th.—In country places the dung heaps, &c., are the principal media of diffusion.

7th.—All the specific diseases multiply their kind after similar means of propagation.

8th.—All of them establish a constant series of morbid changes and lesions, and always issue in the production of its own specific germ or miasma.

9th.—Certain receptive conditions or a predisposition exist in individuals which appear essential to the development of the specific poisons and the establishment of the disease, and an immunity against a repetition, is generally conferred by one attack.

10th.—Putrescent emanations seem to favor the development and spread of these diseases.

Laws of Epidemic influences.

1st.—Predispose to disease independently of any other cause.

Give increased energy to other causes, and give rise to new and anomalous forms of disease.

2nd.—Give rise to peculiar types of prevailing diseases.

3rd.—Impress other diseases with their peculiarities.

4th.—Their manifestations are preceded by modifications in the character of prevailing diseases.

5th.—First effects most violent.

6th.—Sometimes disappear entirely after a short prevalence; sometimes continue with intermission, 2, 3, 4, or 5 years.

7th.—Different epidemic diseases are apt to alternate.

8th.—The lower animals are also subject to epidemic influences. XXX. p. 213—223.

V.—Crusation.

On this head the information is necessarily somewhat speculative. The subject resolves itself into the two usual divisions of predisposing and exciting causes.

1. Of the *predisposing causes* the most important is *season*. The more severe epizootics of which we have a record have occurred either during the cold weather or towards the close

(1) n.

(2) XXVIII.

(3) L I.

(4) XVIII. 1.

(5) I.

(6) XVI.

(7) XIII. 1.

(8) XI. 2.

(9) XVII.

(10) XVII.

(11) VII. 2.

(12) XXIV.

(13) XII.

(14) VIII. 1.

(15) XXV.

(16) XIV.

(17) VII.

(18) XV. 1.

(19) XV.

(20) VI.

(21) III.

(22) XXII.

(23) XVI. 2.

(24) VI.

of it. The Assam epizootic of 1853 raged from January to June. (1) Lambert writing in June states that the Ceylon epizootic of 1842 had raged for many months. (2) Captain Nelson writing in July, states that the Madras epizootic had lasted three months. (3).

The Darjeeling epizootic broke out in November (4) and again in April, and subsequently in August and September.

The Calcutta epizootic broke in January and continued till April. (5)

The Tipperah epizootic seems to have broken out in February. (6)

The Backergunge epizootic broke out also in February (7). Dr. Jackson writing from Balasore says:—"natives state that December, January, and the early part of February are the worst months during the year. The virulence begins to decrease on or about the latter month (8). Other reports vary slightly.

In Hooghly it is said to appear every year in the beginning of the hot season. (9)

In Bhadrupore it is said to attack cattle during the winter months. (10)

In Behar it is stated to prevail at the conclusion of the hot weather and beginning of the rains. (11)

It prevailed in Bograh in May 1866. (12)

In Nuddea it is stated to occur in April and May. (13)

Mr. Sawers says that "all admit that the disease is worst in April and May. (14). This coincides with the result of my own observations. (15) In the Eastern Doars Gootee is described as recurring every year in May, June, and July. (16) In Chumparan Gootee is said "to prevail in the rains but may remain a whole year in a herd." (17) Mr. Stevens states that Gootee is prevalent from Chyett to Assar (April to June), and Khoraha from Assar to Bhado (June to August). (18) Dukuha in Patna is said generally to break out in July and August. (19)

In Maldah Gootee is said to commence in August and extend up to April. (20)

In Noakally cattle disease is said to prevail in September and October. (21) In Cuttack foot and mouth disease prevailed in July. (22) In the station of Comillah a severe epizootic raged in July and August. (23) In Assam cattle disease is said to break out in April and May and September and October. (24)*

* In April 1867, an epizootic of cattle disease broke out and lasted till the middle of August, XXXV. 2. In British Burmah, according to Mr. Gudgin, Veterinary Surgeon, cattle disease (Faschima) is most prevalent during the latter part of the dry and early part of the rainy season, XXXVI. p. 6.

From the foregoing evidence it is clear that while the epizootics under consideration may occur in any month of the year, they are less frequent during the rains and more common during the dry months, and adopting Dr. Macpherson's division of the year there is reason to think that the same order of prevalence and severity obtains in regard to epizootics which he has indicated with respect to cholera, (1) namely,

(a) XIX, p. 2.

that the hot months (March, April, and May,) produce most disease; the cold months (November, December, January,) come next; the transition months (February, June and October,) next; and the wet months (July, August, and September,) produce least epizootic disease*. This is readily inferable from the record above given. As to the peculiarities of those seasons in which the disease was most virulent and fatal, I possess no data. The

(a) XXIX.

season preceding the Assam epizootic is stated to have been a dry one. (2) The extensive prevalence of an "epidemic" of fever seems to have in 1864 preceded or coincided with an unusual prevalence of epizootic cattle diseases in the Presidency Division. The cold weather of 1865-66 was marked by an early stoppage of rain, and a violent outbreak of fever and cholera in the District of Jessore, and cattle disease broke out violently to the south of the District and extended to Backergunge about the same time. On this head information is greatly wanting, and, now that attention is being directed to the subject, will doubtless, in future epizootics, be furnished.

2. As to the *conditions of country and soil*, which either produce or favor the spread of epizootic diseases, it is difficult to give an opinion. We have seen that cattle diseases are prevalent all over Bengal, and while there is a general similarity between the state of surface and soil of each district, there is also a considerable variation in particular features and conditions. The most virulent epizootic recorded is the Assam murrain of 1858. This prevailed principally on the banks of the Brahmapootra, in a damp jungle malarious tract. From a perusal of the various papers collected, it is also evident that the disease is more prevalent and severe in the Divisions of Nudda, Burdwan, Chittagong, Cuttack, Assam, and Dacca, than in those of Patna, Bhargulpore, Rajshahye, or Chota Nagpore, though the difference is probably not a great one and perhaps only apparent.

(a) XXIX.

3. With respect to the *food* of cattle, Dr. Long lays considerable emphasis on bad food as a predisposing cause of the Assam plague: particularly coarse grass and old dry straw. (3) The Civil Surgeon of Malah says:—
"The disease prevails most when cattle are fed upon grass from lands which have been submerged and when freely fed in the month of August on fresh cut paddy straw. (4)†

(a) VI.

Mr. Terry in Midnapore writes:—"From long experience I find diseases among cattle begin when green food is scarce." (5) Mr. Eyre, Deputy Collector of Sarun, also instances "insufficiency of nourishing green food during the cold and hot seasons" (6) as a cause of Epizootics. There can be little doubt that either an indigestible quality or an insufficient quantity of food as affecting the condition of the animal must be an important predisponent to disease.‡

(b) IV.

(a) XV.

4. The *condition of the animal* was considered by Dr. Long as having an important predisposing effect in favor of infection. (7) Dr. Palmer remarks that in the Calcutta epizootic all kinds of cattle, well conditioned and strong as well as weak and lean, were attacked. (8) He is of opinion that the eczema epizootica selects the ill fed, over worked and weakened constitution. (9) The truth seems to be that in a virulent epizootic all conditions of cattle are liable to attack, while in a less virulent visitation the weakly first succumb.

(7) XXIX.

(8) X., p. 2.

(9) X., p. 2.

5. As to the predisposing effect of *age and sex* there are no facts available, but these conditions have probably little or no influence in determining the course of the disease.

6. In regard to *unsanitary conditions*, overcrowding, damp, neglect of cleanliness, &c. There can be no doubt from analogy that these conditions must exert a baneful effect in favor of the spread and severity of the diseases under consideration. Dr. Long in his excellent report of the Assam epizootic insists strongly upon the predisposing influence of such conditions, and it is important to note that in this epizootic the cattle of the Revd. Mr. Higgs,

* With regard to individual diseases, Khorah would seem to be most prevalent during or after the rains, Gootag during the hot months, and Puschima during the cold months.

† A very interesting observation confirmatory of this view has come under my notice: a gentleman in this district found that when his sheep were allowed to graze on grass which had been submerged by the unusually high inundation of this year (1867) they contracted and died of a disease exactly resembling Puschima. He lost thirteen sheep of this disease during the month of October. He then caused all his sheep to be house fed and the disease disappeared.

‡ Mr. Gudgeon, Veterinary Surgeon, in a report on Cattle Disease in British Burmah, makes the important observation that cattle allowed to feed on the rank grass of the early rains after having been accustomed to the dry fare of the previous months are apt to have "Black Quarter," an inflammatory fever accompanied by erysipelatous swelling of one or more limbs.—XXXVI., p. 2.

which were more favorably circumstanced in these respects, suffered from a milder form of disease than was prevalent in his neighbourhood.*(1)

The Assam epizootic was a peculiarly malignant one, and the description given of their condition shows that the comfort and cleanliness of the animals were greatly neglected. An important fact is also mentioned by Dr. Long in the same paper. He says that

neither the Mesries nor their cattle suffered from the then prevailing diseases, and he attributes this to the care with which both men and cattle were housed and protected from the influences of damp and malaria. Mr. Lambert of Ceylon also attributes the immunity which his own cattle enjoyed for months from the disease which was prevailing in surrounding plantations to the "generous diet, absolute isolation and care bestowed upon his cattle."(2)

(2) XXVIII.

What the *exciting causes* of the various forms of epizootic disease under notice are, we have as yet no positive evidence, and the opinions entertained on the subject are rather inferences from the strict analogy which obtains between epizootics and epidemics, and from a consideration of the circumstances of the mode of appearance and spread of the diseases themselves.

1. The most probable theory on this subject is that these diseases are caused by a specific poison. In what manner this poison was primarily generated, whether it was originally derived from the soil, or whether it is now capable of being developed under peculiar conditions of atmosphere and soil, are questions which we cannot in the present state of science answer. Under favoring meteorological and other conditions† this poison becomes active, and entering into the animal along with the air it breathes, the water it drinks, or the food it eats affects the blood and nervous system primarily and the tissues of the body secondarily, setting up a definite and characteristic specific train of symptoms, multiplying in the body and stimulating a morbid activity of the various outlets of the organism, thereby causing eruptions and discharges by and along with which the poison tends to be eliminated from the body. These discharges are believed to contain the poison in abundance and to be capable in suitable circumstances of generating the disease in another animal.‡

2. The spread of the disease must depend upon the condition of the poison, the substances to which it may attach, or the agencies by which it may be removed from one locality to another. A gaseous poison will spread by simple diffusion through the atmosphere and will be wafted by the wind; a liquid poison will attach to water or to solid substances; a solid poison may be dried and wafted by the wind or adhere to articles of clothing, houses, straw, &c., a parasitic infecting agent will be propagated by contact or by means of clothing, &c.§ A poison which is generated under circumstances peculiar to a particular place is, with reference to human disease, endemic: when it is developed so intensely or abundantly as to spread over large tracts of country and affect masses of men, it is epidemic. These statements are at present generally held by Physicians, and might be abundantly illustrated. I have brought them forward in the foregoing terse form, because they apply as appropriately to and may be illustrated as aptly by the epizootic diseases as by the epidemic. This will appear from a consideration of the "modes of origin and spread" of epizootics already dwelt on. We can also understand why the dry months are more favorable to the appearance and spread of these diseases than the wet, as already shown.||

* The precise conditions of this kind which appear to affect animals in this country are—

1st.—Housing in low damp sheds where they are congregated in too great numbers, and this obtains more during and after the rains than at any other time of year. Cattle are carried away for the purposes of cultivation from the bars of the owner to fields at some distance, and herded together in wretched sheds very slightly raised from the surrounding water. I have seen some miserable examples of this in the Sunderbunds.

2nd.—Over work. During the busy season cattle are not only over worked, but worked walking up to their bellies in water.

3rd.—Neglect of rubbing down. This ought always to be done when the cow is wet from perspiration or water.

4th.—Bad food and drink, hard old straw, coarse grass and blue water.

5th.—Working too long at a time in a hot sun without food.

† These conditions are high temperature, moist soil, absence of rain, great evaporation, and generally states of atmosphere favoring putrefaction. That the diseases in question are capable of being generated in a locality of being manifested in an endemic (epizootic) or epizootic form is rendered highly probable by the observation of Major Lamb, who, in discussing the origin of an epizootic in Assam, (1867) observes that the disease made its appearance *simultaneously* in several Monaks in the Darrang Mehal. (XXXV. 1.)

‡ There is another source if not of the development, at any rate, of the multiplication and intensification of certain poisons, particularly those of typhoid fever, cholera, and dysentery indicated by the observations and experiments of Simon Thoirich and Pettenkofer, besides their development within the animal body, namely, that which takes place during the decomposition of accumulations of the excrements of these diseases, under influences favoring putrefaction. XXXII. p. 226 and 228.

§ Mr. Medlerold, (XVIII.) hints at the probability of this being the means of conveying the infection from one animal to another. Not only is this highly probable, but the agency of jackals, dogs, cows, vultures, kites, &c., may be the means of infecting pastures and dispersing disease of an epizootic character. If, as there is every reason to believe, the poison of specific diseases is portable, the possible agency of the lower animals in conveying it cannot be denied and may serve to spread even diseases peculiar to man. But in the case of carrion birds and animals, actually feeding on the corpse of a diseased animal, the probability of conveyance to other animals is much stronger. This constitutes one strong argument in favor of burial.

|| The effect of rain in putting a stop to epidemics is a well recognized fact. MacPherson says "the two most important agents in diminishing the prevalence of cholera appear to be a heavy fall of rain and diminished range of temperature." (XIX. p. 7.) In the October number of the *Indian Medical Gazette* for 1867, there is a remarkable illustration of an epidemic of cholera having been put a stop to by a heavy fall of rain.

There can be no doubt that the exciting causes of epizootics are constantly present throughout Bengal, giving rise in healthy seasons to sporadic cases and mild visitations, and in unhealthy seasons, that is, under circumstances favoring their development, to wide spread and fatal disease.*

3. Without enlarging on these speculative points the practical and important point of infectiousness remains to be considered. The great majority of those who have reported on epizootics are agreed on this subject, and consider the diseases under discussion highly infectious. Such was the opinion of Dr. Long with reference to the

- (1) XXII.
- (2) VI.
- (3) VII.
- (4) VIII, 1.
- (5) X, p. 1.
- (6) XIX.
- (7) XIII, 1.
- (8) VIII, 2.
- (9) XXXIV.
- (10) XXIX.
- (11) X, p. 1.

Assam Epizootic : (1) of the Civil Surgeon of Maldah : (2) of Dr. Coates of Champaran : (3), of Dr. Barry : (4), of Dr. Palmer : (5), of Dr. Anderson : (6), of Dr. Bensely of Backergunge : (7) of Mr. Sowers of Culna (8) and of numerous non-professional reporters. (9)

Dr. Long reports an instance of a diseased cow having infected five others. (10) (Gootse.) Dr. Palmer says that there is ample proof that many healthy cattle contracted the disease (Puschima) at the exhibition and carrying it to their homesteads infected others. (11)

The Magistrate of Backergunge states. "The attack at Lahory was at first so mild that not more than two head of cattle perished in April. An inhabitant of the neighbouring village of Ghazee-pore bought a cow apparently in good health at Lahore and took it home. Within a day or two of the purchase the animal sickened and infected almost all the cattle in the neighbourhood, large numbers of which perished." (12)† This is a most interesting and important observation, and tends to show that there must have been something in the sanitary condition of Ghazee-pore predisposing to a severer form of disease than at Lahory. In such an instance as this it would be highly important to determine accurately what the difference of condition was which in one case determined a mild and in the other a severe form of the same disease. There can be little doubt that a diseased animal is capable of infecting others not diseased, and under suitable circumstances of spreading the disease. The evidence adduced is at any rate strong enough in favor of the infectious nature of the disease for practical purposes, and the belief should be acted on as if it were a certainty. When on the subject of treatment, I shall notice several striking instances of precautions against infection having apparently warded off the disease from large numbers of cattle.

The question of endemic origin or importation differs from that of infectiousness. The former is still under dispute and uncertain, and the latter beyond reasonable doubt. Mr. Gudgin, Veterinary Surgeon, in his history of the Cattle Disease (Puschima) of British Burmah (13) discusses the question:—was the disease imported? or is it indigenous? He inclines to the former opinion, and assigns the following reasons in support of his opinion:—

1st.—There is every facility for importation of the disease into Burmah by the annual cattle trade between that and surrounding States.

2nd.—The disease has been more prevalent of late years, and there is reason to think that communication between districts has become more general and easy.

3rd.—If the causes of disease were indigenous, depending on some bad condition of soil and atmosphere, these would affect the general health and condition of stock. He admits, however, that the poison has during the last few years been always present in the country, and when favored by suitable circumstances has given rise to wide spread disease. This admission considerably weakens the force of the argument. Even with regard to human diseases it is most difficult to speculate on the primary origin of specific disease poisons, as the whole subject is so wrapped up in hypothesis. (14) These diseases must undoubtedly have been due to causes external to man, on their very first appearance, and it is highly probable that such causes and the conditions of their development still exist, yet so involved and difficult is the subject that even when a disease, such as Cholera or Puschima, is proved to have sprung up in a district at many independent centres at the same time, the advocates of the importation theory can ascribe the phenomena to the arousing into activity of numerous dormant poison germs by favoring physical conditions. As to cattle diseases data are wanting to determine the

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(13) XXXVI, p. 218.

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* The analogy between the laws affecting the prevalence of cholera and the circumstances regulating the appearance and diffusion of epizootics is striking, and a perusal of Dr. Marsherson's work (Chapter I, III) will reveal the close correspondence. These circumstances are stated by Veterinary Surgeon Gudgin to be "epidemic influence," increased activity in the cattle trade, or when the healthy state of the herds of buffaloes has been lowered by drought, imbrutious or insufficient food or the digestive organs functionally deranged by sudden access to luxuriant pasturage. XXXVI, p. 14.

† The report of Mr. Gudgin, Veterinary Surgeon, on cattle disease in British Burmah, details several remarkable instances of the disease (Puschima) having been introduced into villages by cattle brought from localities where the disease has been prevalent.

Mr. Gudgin also makes the important remark that places where cattle are bought and sold, and when there is every facility for importation, suffer more from cattle disease than isolated localities. XXXVI, p. 4.

question, and for practical purposes it is safest and best to believe both hypothesis, namely, that epizootic diseases are sometimes due to endemic causes without importation, and sometimes to importation with favoring endemic conditions, as there are facts which favor both opinions and they are not in any way opposed to or inconsistent with one another.

IV.—Symptoms.

In all the epizootic diseases under consideration, there are two classes of symptoms observable:—1st, general constitutional symptoms of a febrile kind merging into a typhoid condition and prostration in severe cases; and 2nd, local symptoms of a more or less specific character.

I.—The symptoms of Eczema Epizootica, "Foot and Mouth Disease" or Khorah, vary considerably in degree from a simple vesicular eruption upon the feet and mucous membrane of the mouth with little or no constitutional disease, and small mortality, to an eruption of a vesicular nature, covering a large extent of the surface of the body, accompanied with febrile and other constitutional symptoms of a severe kind, resulting in death in a great proportion of cases. It is of importance to note this variation of symptoms, and it will generally be found that the severity of individual cases depends upon the mild or severe nature of the epizootic. The period of incubation of this disease has been very definitely fixed by a series of experiments conducted by the Royal Veterinary College in London. The disease was produced in healthy cattle by feeding them with hay saturated with the saliva of diseased animals. The effects were developed in 36 hours(1).

(1) XXX., p. 85.

These experiments are also interesting as demonstrating the contagious character of the affection, and showing that the discharges from the site of specific local disease are capable of conveying the infection.

The importance of this fact with reference to sanitary and preventive measures is great.

(2) XV., 1.

XXX., p. 86.

(3) XXX., p. 86.

(4) XV., 1.

(5) XV., 1.

(6) XV., 1.

(7) XV., 1.

(8) XXX., p. 86.

(9) XV., 1.

(10) XV., 1.

(11) XV., 1.

(12) XV., 1.

A severe attack of this disease is usually ushered in by fever of a remittent type.(2) Whether this is preceded by any signs of constitutional disturbance, as lassitude, restlessness, disregard of food, &c., does not appear. Shivering fits are described.(3), Rumination is suspended;(4) the appetite is lost;(5) and there is great thirst;(6) the skin is rough, hot and dry,(7) the udder is hot and tender to the touch;(8) the eyes and mouth water.(9) In cows lactation is diminished(10). The urine becomes high colored(11) and diarrhoea of a dark green color and very fetid is described.(12)

How soon after the appearance of the constitutional disturbance the specific local effects arise, I have no data to show.

Sometimes the feet are mainly or exclusively affected, and sometimes the mouth, and in bad cases the eruption is found on the udder, the organs of generation,

(13) XXX., p. 86.

and the spaces between the digits.(13) The eruption is purely vesicular, consisting of small blisters, containing a transparent fluid; the tongue, roof of the mouth and lips are covered with these. The coronets of the feet become hot and swelled, and similar vesicles are found between the claws. When the feet are severely

(14) XXX., p. 87.

(15) XV., 1.

affected lameness invariably ensues.(14) When the disease is fatal death is caused by the severity of the constitutional derangement and occurs on the eighth or ninth day(15). In most cases the general disturbance abates, the vesicles dry up and become crusts, the appetite returns, and the cow is well in fourteen or fifteen days.* The mortality of this disease varies with

(16) XV., 1.

the type of the epizootic. It is put down by Mr. Stevens, on whose intelligent description I have drawn for much in the foregoing,(16) at 25 per cent. of cases. Of 42 of the cattle belonging to the Royal Artillery at Outback, 34 had recovered and the remainder were convalescent when the report was written.(17) In this case the animals were carefully treated, and I am inclined to think that Mr. Stevens's proportion

(17) XXII.

(18) XVIII., 1.

is rather high. Mr. Herrold(18) says that if not well attended to 10 per cent. of the animals die.

The complications of the disease including the effects of want of proper care are:—

1st.—Ulcers on the mouth and udder caused by breaking of the vesicles.(19) These are often troublesome and frequently those of the mouth occasion death through inability to take sufficient food.

(19) XXX., p. 87.

XXIII., 2.

2nd.—Ulceration of the foot and disorganization of the horny material of the hoof(20), sometimes the hoof falls off(21); this event is generally the result of neglect of proper treatment.

(20) XXX., p. 87.

(21) XXIII., 2.

3rd.—Development of maggots and consequent ulceration and inflammation.(22) This also results from neglect of the proper measures to prevent the attacks of flies and very often causes the death of the animal.

(22) XVIII., 1.

XV., 1.

It is of extreme importance to bear these complications and their mode of occurrence in mind, because it is from them that in most cases death occurs and they are as a rule preventable.

* "Curable in ten days," Mr. Cockburn (VI.)

II.—I now proceed to the symptoms of the disease distinguished as "Gootee" or "Bohonto." In Khorah the local manifestation constitutes the most prominent symptom of the disease, and except in severe cases or epizootics the constitutional disturbance is of secondary concern. In this disease on the contrary the local manifestation is of small concern, and the constitutional derangement most serious and severe. It is from the latter, the natural sequence and duration of constitutional symptoms, that the disease derives its specific character, more than from the eruption, though the latter is *when present* also characteristic enough. A comparison of the various accounts given of different epizootic manifestations of this disease clearly shows that there is a very considerable variation in the severity of the symptoms and type of the disease—that while in one case of epizootic the disease may be comparatively mild, and the mortality, though always great, not extreme, in another case of epizootic the type may be malignant and the mortality excessive. It will be also noted that in some epizootics of what was undoubtedly Gootee no eruption was observed in many cases,* while the grouping and sequence of the symptoms leave no doubt that the disease was the same as that in which an eruption was observed. The character of any case in an epizootic must be considered in relation to the broad typical features of the disease as obtained from a generalized comparison of several well marked cases carefully examined, and I would strongly deprecate the tendency to remove individual cases of disease into another category, because a particular manifestation was absent or ill developed. It is also to be observed that the word pustule has been undoubtedly used in the description of this disease by unprofessional observers in a loose and general sense, and much obscurity and confusion is introduced into the subject from the apparent application of the term to denote any eruption, whether vesicle (a small pointed bleb or bladder containing transparent fluid) pustule (a small more or less circular or rounded bleb or bladder containing pus or yellow matter) or crust (concreted lymph or pus embedded in a small ulcer). This distinction ought carefully to be borne in mind in future descriptions of epizootics. The disease under notice is undoubtedly the most wide spread and fatal in Bengal, and I shall therefore go into its symptoms in detail. I am fortunate in having myself seen and examined carefully several cases of the disease, and in having descriptions of the disease written by several Medical Officers, Dr. Long of Assam, Dr. Coates of Chumparun, the Civil Surgeon of Maldah, Dr. Jackson of Balaore, Dr. Greene of Tipperah, and Dr. Bensley of Backergunge, and by several non-professional gentlemen of great intelligence.

Having premised these general remarks, I shall first give the details of what I conceive to be a typical manifestation of the disease and then a description of the severer forms.

As to the period of incubation of this form of disease, I have no facts from which to draw a reliable inference. It is probably short judging from the observation of the Magistrate of Backergunge, already quoted (1) (p. 11.) The point might be easily fixed by observing how soon after the introduction of a diseased animal into a healthy locality or herd the disease appeared, or experimentally by inoculating healthy animals with saliva or lymph, or giving them food saturated with the former.

(1) XIII. 1.

(2) XXIX.

The premonitory symptoms are stated by Dr. Long, (2) to be as follows:—The animal is observed to become listless and dull, to stand apart from the rest. The skin becomes dry and rough, and there is a short dry not frequent cough. The animal does not feed so heartily as usual, and in cows the quantity of milk is diminished.† A careful observer will probably in all cases be able to observe these symptoms of impending disease, which are generally overlooked. Their importance with reference to treatment cannot be over-rated.

(3) XXV.

(4) XXIX.

VIII. 2.

XI. 2.

XVI. 2.

XIII. 1.

XX.

After this condition has lasted two to four days, fever, either preceded by shivering (3) or not, sets in. The appearance of shivering or fever marks the commencement of the *second or febrile stage* of the disease. It generally lasts two or three days (4)† and its symptoms are—

1st.—Elevation of temperature; this is best observed in the axilla, at the root of the horns or in the inside of the ear.

2nd.—Roughness of skin caused by elevation of the hair (horripilation) and dropping back of ears.

3rd.—Increased pulse and accelerated breathing.

(5) XXIX.

VI.—VII.

XVI. 2.

4th.—Complete refusal of food.

5th.—Absence of rumination.

6th.—Intense thirst‡ (5.)

* This is pointedly brought out by Mr. Driberg of Mangledya, Assam, who says that in the epizootic of 1867, "in some cases an eruption breaks out." XXIV., 8.

† Mr. Driberg of Mangledya, Assam, describes the premonitory symptoms as partial loss of appetite and great lassitude. (XXXV., 3.)

‡ Dr. Coates states the duration of the fever to be eight or nine days (III.) This I think must be overstated.

§ Major Lamb in an epizootic of Gootee in Assam states as one of the symptoms.—"Refusal of food and drink." XXIV., 1.

744.—Swelling of eyes which become inflamed, sometime hemorrhagic.
834.—Salivary and discharge of watery fluid from nostrils. Dr. Long states that in this stage vesicles may be seen in the mouth.

944.—Dry muzzle which presents a curious reticulated appearance.

1044.—Cough occasionally.(1)

(1) VI.
XL. 2

1144.—Swollen tongue covered with pointed elevations.

1244.—Urine high colored, like blood.

1344.—General appearance of severe sickness, head drooping, back up, flanks hollow, posture not altered and eye dull or bleared.

(2) XV. 1.

1444.—In cows lactation is completely suspended in this stage.(3)

These are the manifestations of a general febrile disorder, and in varying degrees of intensity may be noted in every case.

It were desirable that the variations of temperature and pulse were noted in order to determine accurately the exact character of the fever. This could only be done by careful repeated observations of the same animal.

On the third or fourth day (reckoning from the commencement of second stage) the third or eruptive stage sets in.

The eruptive nixus affects the mucous membrane of the intestinal tract causing first diarrhoea and then dysentery, and the skin of the body causing an eruption.

The diarrhoea usually precedes the appearance of the eruption by a day. Dr. Long says that it supervenes on the second day; (3) Dr. Greene says the third day (4) Mr. Savers the second or third day; (5) and Dr. Bensley the third or fourth day. (6) The stools are described as "broken up, slimy, frequently foetid" (7) "serous mucous and sometimes bloody" (8) "brownish, black, watery and very offensive"; (9) "thin but foul in smell," "watery," &c. All observers agree in stating that dysentery succeeds to the diarrhoea. Its period of appearance is not very well fixed, but the fifth day may be taken as an average.

(3) XXIX.
(4) XVI., 2.
(5) VIII., 2.
(6) XIII., 1.
(7) XXIX.
(8) XIII., 1.
(9) XVI., 2

The eruption makes its appearance on the fourth or fifth day. (10) It is essentially vesicular. Dr. Long calls it an "eruption of dry pustules—"scabs" (?); Dr. Coates describes "papules succeeded by pustules." Dr. Jackson, "vesicles which subsequently mature." Dr. Greenel, "minute elevations beneath the skin." Dr. Bensley, "pimples or scabs." In the cases which I examined, I observed only scabs, consisting of small black or light yellow crusts set in small ulcers and surrounded by a ring of redness. The extent of the eruption and the size of the vesicles varies in different cases.

(10) VIII., 2.
XL. 2

Most commonly the udder, the stomach, the axillae and lower part of the neck only are covered; but in some cases the whole body breaks out. Dr. Coates states that the mouth, palate, and alimentary canal are attacked with pustules. Mr. Stevens says that it extends to the tongue and throat.* The hair in the vicinity of the vesicle loosens and may be wiped off. The extent to which the hair may be removed is a good index of the severity of the eruption. In some cases it is removable to such an extent that the skin is wholly denuded

(11) I., 2.

of pile, red and raw. (11) In some cases there is no eruption observed, and some enzootics are characterised by greater freedom from eruption than others.

These appear to be more malignant than those in which a copious eruption appears. Some observers have remarked that cases in which the eruption is copious

do better than those in which it is scanty or suppressed. (12) This accords with what I have myself been told by natives. I doubt much if any case which survives the fifth day will on careful inspection be

(12) VI.
XX.

found free of a cutaneous affection of some sort, and I suspect that small papules, pimples, or crusts giving a sense of roughness to some parts of skin, will be found in all such cases; any case dying before the fourth day will of course show no eruption. During this stage the constitutional symptoms undergo a change. The fever intermits, assumes a typhoid type or yields to prostration. The pulse becomes small and weak retaining its rapidity. The temperature diminishes, and the extremities become cold. Refusal of food and suspension of rumination continue; thirst abates; the eyes become redder and the discharge turbid or actually purulent. The nostril and mouth discharges are apt to become brownish and foetid. Aphthous-looking ulcers are found sometimes on the lips and gums. The tongue becomes more swollen and dark. Prostration increases and the animal eventually lies down. Wasting sets in. The glands of the throat are observed to swell in severe cases, and in some cases the stomach. Flies attack the discharges and mucous orifices. Ulcers are prone to form and the animal is liable to die of exhaustion. When death ensues it does so at a period varying from five to ten days, and recovery is slow and in many cases imperfect;

The duration of the disease from the commencement of the first stage to the occurrence of

death or a change for the better is put down by Dr. Long at twelve days, (1) by Mr. Hope, at five to ten days, (2) by Mr. Sawers at five to eight days, (3) by Lieutenant-Colonel Agnew at seven to fifteen days, (4) by the Deputy Magistrate of Behar, at a week to ten days, (5) Mr. Eyre of Sarun, at five days, (6) by Mr. Stevens at eight or nine days, (7) by Dr. Graene at six or seven days, (8) by Dr. Jackson, at ten or twelve days. (9) Four to seven days is reported from Beerbhoom as the duration, (10) five to seven from Darjeeling, (11) five to eight from Jessore, (12) four to fifteen from Durrung, (13) six to seven from 24-Pargunnahs, (14) six to seven, from Singbhoom, (15) and two to ten or eleven days from Jessore. (16) The duration of the disease in cases which recover, that is, the time which elapses between the first appearance of symptoms and the complete restoration of health is from fifteen to twenty days. (17)

Mr. Sawers of Culna says that a second attack of Gootee is "almost unknown." (18) This is a highly important observation, and the subject merits careful attention and inquiry, with especial reference to the subject of inoculation.

The number of cattle lost from this disease throughout Bengal yearly is very great: the mortality in some accounts is put down = hundreds, in others (19) as thousands. (20) Particular epizootics have been extremely fatal. In Assam the loss of cattle is estimated at 1,20,000, (21) in Backergunge, at 30, or 40,000, (22) in Tipperah, at 15,482, (23) and in one Sub-division of Jessore, at 12,000. (24) The rate of mortality is very high. The estimates vary somewhat, and are all more or less speculative and perhaps exaggerated. Dr. Long estimates that 70 per cent. of the whole stock were attacked and 45 per cent. or 64·2 per cent. of those attacked, died (25) Dr. Jackson says that one-third to two-thirds of those attacked die. (26) In Tipperah the mortality was reckoned to be 90·5 per cent. (27)

In the station of Commillah of 108 cattle 60 or 55 per cent. were attacked and 50·9 per cent. of the whole (61·5 of the attacked) died. (28) My own inquiries lead me to conclude that about 90 per cent. of the cattle were seized, and that about 90 to 95 per cent. of those attacked died. (29)* These statements are vague and go no farther than to show that the mortality is very serious in all epizootics of this nature and more so in some than in others.

In the severer manifestations of this disease, such as were observed by Dr. Long in Assam, the following additional symptoms were noted:—

1st.—Earlier fetor of the breath and discharges.
2nd.—Earlier and more severe swelling of the glands of the neck proceeding to suppuration and ulceration.

3rd.—More violent fever at the commencement, and more rapid wasting and prostration.

4th.—Earlier cooling of the body and wasting.

5th.—Dejections more fetid and dysenteric.

The complications which are apt to occur in course of this disease are:—

1st.—Inflammation of the lungs. This I am inclined to think is rare. The symptoms of this event are frequent cough, accelerated breathing, quick pulse, evident pain in one or both sides, increased by pressure, a peculiar low grunt or loud moan and dulness on percussion, a crackling sound being heard when the ear or stethoscope is applied.*

2nd.—Ulceration of the vesicles on the udder or mouth.

3rd.—Confluence of those on the skin.

4th.—Ulceration of the glands of the throat.

5th.—Development of maggots in the ulcers or at the mucous orifices.

6th.—The condition of "Kardel bound," or stuffing of the third stomach with dry food. This condition can hardly be recognized unless evident pain or distension of stomach with grating lead to a suspicion that it exists. It should, however, be guarded against in every case by means to be afterwards detailed, because *post mortem* examination reveals its frequent occurrence, and the disease is of itself sufficient to kill the animal.

7th.—Tympanitis or flatulent distension of the first stomach probably dependent in most cases on the preceding condition but occasionally perhaps caused otherwise. This condition cannot be mistaken, the belly becoming enormously swollen.

8th.—Erysipalatus inflammation of the connective tissue. This was more particularly observed in the malignant epizootic of Assam.

* Mr. Stevens says that the proportion of deaths to seizures is 60 per cent. XV., 1.

† This indicates Pneumonia: a wheezing, whistling, or bubbling sound will indicate Bronchitis.

III.—Before going on to describe the non-eruptive epizootics, I shall here give for comparison a short detail of the symptoms of true cow-pox—*vaccinia*. This is all the more necessary, as the disease considered in the preceding section is frequently called cow-pox, simply because it is characterised by an eruption (pocks) affecting cattle.

In *vaccinia* the constitutional symptoms are slight or wanting, and the local symptoms or specific manifestations well marked and prominent. The latter constitute the essence of the disease.

After a period of incubation of from six to nine days⁽¹⁾ a faint blush may be observed upon the udder which is hot and tender. This continues for two to three days, and is succeeded by a patchy redness quickly followed by the appearance of raised papillæ or pimples. In three to five

days these increase to the size of pea and become vesicles containing a transparent viscid fluid. These increase to the size of a horse bean, are depressed in the centre, and are round or oval in shape, measuring eight to ten lines in diameter. In two or three days they become yellow and are converted into pustules, which assume an acuminate form and contain a thick viscid yellowish material. A scab or crust ultimately forms. These are dark brown or black, solid, round, flat or uniform, and are embedded in a small pit with a raw surface and white central slough. They spontaneously separate on the twentieth or twenty-third day, leaving a shallow smooth, oval, or circular pit of a pale rose or whitish color, with some traces of induration around it.

The constitutional symptoms are slight fever, dry muzzle, slightly accelerated breathing, fastidious appetite and diminution of the secretion of milk. These appear after the local

symptoms manifest themselves and decline as they advance.⁽²⁾ Cattle suffering from this disease are liable to a purely vesicular eruption over the body, which appears on the ninth or tenth day of the vaccine disease.⁽³⁾

"The vesicles within 24 hours contain a pellucid serous fluid raising the epidermis. On the following day they become turbid, the cuticle collapses or bursts, and a thin brittle, filmy crust forms and speedily falls off; successive crops continue to form and desiccate for three or four weeks."

IV.—The terrible epizootic known as Puschima, and which Dr. Palmer believes to be identical with rinderpest, is characterised by severe and malignant constitutional symptoms, the absence of any cutaneous eruption, and by specific lesions of the mucous and intestinal tract with swelling of the adjacent glands. The disease may be divided into three stages, premonitory, febrile, and diarrhetic.* In describing these I shall mainly follow the careful and exact observations of Mr. Rutherford, referring for confirmation to other records.

The period of incubation appears to be short. In the Ceylon epizootic it is stated that a few days only elapsed after removing the cattle to a place where they were exposed to

infection, when the first case appeared.⁽⁴⁾ Mr. Floyd removed a cow laboring under disease from the Alipore Exhibition to his farm. In a week another cow was taken ill.⁽⁵⁾

Mr. Herrold states that a few days after the arrival of some new cattle at Darjeeling two of them took ill.⁽⁶⁾

These data are very vague, but they point to the probability of a short period of incubation.† In this disease death may occur in a few hours after seizure.

When the case goes through its regular stages sequence of symptoms, the following phenomena may be observed:—

(a.) The premonitory stage is marked by dulness, disinclination for exertion, refusal of food, restlessness, neglect of calf, failing in milk, and other signs of discomfort and disorder. The duration of these symptoms is not noted, but it is probably shorter than in Gootee, and will, I think, be found to be in a direct proportion to the severity of the subsequent disease.

(b.) The febrile stage is in some cases ushered in by shivering.⁽⁷⁾ This is followed by the appearance of fever of a remittent type.

The symptoms of this stage are—
1st.—Elevation of temperature. This is best observed in the horns and ears which are hot with distinct pulsation of the arteries. The extremities are alternately hot and cold.
2nd.—The skin is hot and dry and occasionally clammy, and sweating is sometimes observed; the coat stares (horripilation) the ears also drop.⁽⁸⁾
3rd.—Pulse and breathing accelerated.

* Mr. Gudgin, in his excellent account of this disease in Burmah (XXXVI, p. 16), describes three stages, febrile, diarrhetic, and dysenteric; but I consider my own division more natural and cannot assent to the propriety of splitting up the stage of morbid elimination into two. Indeed, four stages may be distinguished without that, viz. 1, Incubation; 2, Premonitory; 3, Febrile, and 4, Diarrhetic.

† Mr. Gudgin, Veterinary Surgeon, in his report on Cattle Disease (Puschima) in British Burmah, has determined the period of incubation, with considerable accuracy, to be five or twelve days. This is proved by the number of days which elapsed in several cases between the arrival of cattle in a village and the breaking out of disease; five days in one instance, six days in another, and five in a third. He surmises that the period of incubation depends upon the health and idiosyncrasy of the animal infected. XXXVI. 8.

It is now positively known that the animal is capable of propagating the disease during the stage of incubation. (Report of Royal Commission.)

4th.—Total refusal of food.

- (7) XIX.
- (8) XVIII.
- (9) XIX.
- (10) XV. 1.
- (11) XXIV.

5th.—Rumination suspended.(1)

6th.—Intense thirst is described by Mr. Herrold(2) and by Mr. Norman;(3) but Mr. Rutherford states that the animal refuses drink; in this he is supported by Mr. Stevens(4) who says that the animal *can't* drink, also by the Magistrate of Bograh.(5)*

7th.—Eyes dull and expressive of pain; conjunctivæ red and towards the inner canthus ecchymosed spots are sometimes seen. The eye becomes duller and there is a discharge of tears.

8th.—Discharge from mouth and nostrils. The former is watery, gradually becoming mucopurulent. The discharge and air expired through the nostrils are fetid. A sticky saliva mixed with air dribbles from the mouth. The mouth is hot and breath very fetid; in some cases slight ulcerated spots are observed on the Schleimian membrane, which is of a deep red hue, small superficial irregularly edged and of a yellow tinge. In some cases also the mouth opposite the incisor teeth shows a few sores.

9th.—Muzzle dry, hot and glazed, marked by two streams of watery discharge from the nostrils. Occasionally a few drops of moisture are exuded which do not coalesce.

10th.—Cough is noticed in some instances. It is not constant nor characteristic.

11th.—Tongue swollen and coated with mucus and saliva.

12th.—Urine diminished in quantity, of a high color and strong smell.

13th.—Posture and general appearance indicative of severe distress, the animal stands perfectly still or lies down and groans.(6)

- (6) XIX.

14th.—In cows the secretion of milk is early diminished, becoming gradually less. It is of bad quality and of a darker color than usual.

I have arranged the symptoms of this stage on the same plan as those of Gootee, in order to exhibit their great similarity, almost identity. This is all the more striking when we consider that each detail presents, not the observations of one man who might be prejudiced in favor of recognising such a similarity, but the independent observations of different men writing at different times of different epizootics in different places, and in each case these are quoted as nearly as possible in the words of the observers.

There is, however, one set of symptoms of great importance which have been noted in Fuschima and not in Gootee. These are the *epasmodic morerura's*. Mr. Rutherford describes catching of the flanks and frequent twitching of the muscles of the flank.

Other observers are silent on this subject, but the phenomena are such as would probably escape the observation of non-professional observers.

The bowels are natural or constipated(7) in this stage. The throat and fauces are inflamed, and the glands of the throat begin to swell.(8)

- (7) XIX.
- XXXVI, p. 10.

- (8) IV.
- VIII, 2.
- XV. XV, 1.
- XVIII, 1.
- XIX.

- (9) X, p. 2.

- (10) X, p. 2.
- VIII, 2.

c. It is not clear from the several accounts of this disease how long the second stage lasts or when the third stage sets in. The period probably varies considerably. Judging from a case detailed by Mr. Greenhill(9) the period of duration appears to be twenty-four hours, and the purging sets in on the second day. Mr. Rutherford talks of its setting in early.(10) The discharges are described as "thin ejected with violence mixed with mucus and air and shortly with blood."† They are very fetid, tenacious subsequently curdles,

the amount of blood increases, the dejections become like dirty water and are discharged with violence. No skin eruption of any sort is described by any observer.

‡ The other symptoms now undergo a change. The fever assumes a low typhoid form, the temperature falls, and the animal becomes cold. Remission of the fever takes place once a day or once in two days.

§ The skin becomes cold and clammy and sometimes cold sweats break out.†

¶ The pulse becomes quick and tremulous and breath short. The discharges from eyes, nose, and mouth, become more fetid and purulent or sanious. Flies swarm round the muzzle and deposit their eggs within the lids, nostrils, or lips. The expression becomes duller. The swelling of the throat is more pronounced. Complications involving the stomach and lungs are apt to appear.

Prostration, exhaustion, and wasting advance rapidly § The bowel discharges become dysenteric and more offensive, and in the majority of cases the animal succumbs in a day or

* Mr. Gudgeon, Veterinary Surgeon, in describing the cattle disease in British Barmah, states that "water slowly and with difficulty is pertaken to the end." He also describes cattle as taking to the nearest marsh and immersing their bodies in water. (XXXVI, p. 10).

† A dark coffee color tinged with blood but more frequently of a dirty yellow color, thin and offensive to the smell. XXXVI, p. 10.

‡ Mr. Gudgeon, Veterinary Surgeon, (XXXVI, p. 16) describes a reddened condition of the skin between the hind legs with cracks and sores in some cases.

§ The animal assumes the recumbent position, and the head is either turned to the side or extended to the front in a line with the body (XXXVI, p. 10.)

two after the commencement of this stage. The duration of this disease which presents a highly important contrast with Gootee is given by Mr. Rutherford as an average of four days. (1) In Ceylon the average duration seems to have been from 24 to 36 hours. (2) Dr. Anderson says that death takes place in from three to five days. (3) In Burdwan the duration is said to be 48 hours. (4) Mr. Savers says that Puschima proves fatal in 24 to 48 hours. (5) In Bograh the disease is said to last three days. (6) In Patna the animal is said to die in five or six days. (7) Mr. Norman states seven or eight days, (8) and Mr. Stevens eight or nine days. (9) As to the time in which death occurs. In Darjeeling Mr. Herrold says "no case that I am aware of, except one, extended to the fourth day and many succumbed in less than 36 hours." (10)* The average of four days may be taken as a very approximate one.

Although the absolute loss of cattle in Bengal is probably less from this form of disease than from Gootee, the ratio of deaths to seizures is much greater.† Mr. Rutherford computes the early mortality of the Calcutta Epizootic to have been 90 per cent. and the later 50 per cent. In individual instances the loss was even greater. Mr. Floyd and Mr. Stalkart are said to have lost all their cattle. (11) At Seebpore of 18 head of cattle 18 were attacked and all died. Mr. Stevens reckons the mortality at 60 or 70 per cent. of attacked. (12) Mr. Herrold in about 15 days "had not one left of a herd of upwards of 40 head." (13) Dr. Palmer talks of the disease "making a clean sweep of any yard into which it entered." (14) Dr. Anderson says that whole herds are carried off in a few days. (15) Mr. Deane states that "when it enters a homestead it clears the stall." (16) The Magistrate of Bograh states the mortality to be 95 per cent. of attacked (17) and Mr. Gudgin v. s., 85 per cent. (18).

These statements accord very closely and exhibit the terrible nature of the disease. Recovery when it occurs is tedious. Mr. Gudgin, (19) Veterinary Surgeon, says that the disease passes off about the thirteenth or fourteenth day, and that restoration to perfect health takes place about 25 days subsequent to the termination of the attack.

The same authority makes a statement at page 18 that "animals that have had the disease are secure against future attacks." The importance of this statement with reference to inoculation cannot be over-rated and careful observations are required to verify it or otherwise.

The complications which are prone to occur in the second stage are :—

1st.—Inflammation of the bronchis or lungs.

2nd.—Tympantitis.

3rd.—"Fardelbound."

These present the same symptoms as in Gootee.

V.—For the sake of completeness I shall here insert a short sketch of the symptoms of "Rinderpest," partly taken from Dr. Palmer's paper (20), and partly from Mr. Dobson's book. (21)

(20) P. 7.

(21) P. 162.

In this disease we may also describe three stages, a premonitory, febrile, and diarrhoeic.

The period of incubation varies from 7 to 14 days :—

1. *Premonitory stage.*—The principal symptoms are want of appetite, staring coat, diminution of milk, suspension of rumination, and other signs of severe illness.

2. The *febrile stage* is marked by :—

1st.—Elevation of temperature. This is variable and transitory.

2nd.—Skin hot in some places, especially between the legs, an exudation succeeded by cracks and sores take place. Hair staring.

3rd.—Pulse and respiration increased in rate.

4th.—Total refusal of food.

5th.—Rumination suspended.

6th.—Thirst is not described, one account says that in most cases water is refused, another that water will generally be partaken of even to the end.

7th.—Eyes water and are red and expressive of suffering.

8th.—There is a discharge from the mouth and nostrils. Former hot, red, and inflamed, with often raw spots here and there. Breath foetid.

10th.—Cough is noticed in some instances.

11th.—The animal stands with back arched and legs gathered up under the body. If moved it staggers.

* Mr. Gudgin, Veterinary Surgeon, states that the majority of animals affected die on the fifth or sixth day, and that restoration to perfect health occurs in about thirty days.—(XXXVI, p. 10.)

† In British Burmah, according to Veterinary Surgeon Gudgin's interesting report, the loss of cattle from Puschima is most severe. In the space of one or two years from half to two third of the cattle of particular villages were swept away. Mr. Gudgin talks of the disease "dominating herds," "killing off by hundreds," "sometimes making a clean sweep of the whole," &c. He estimates the loss in 1865 at 1,00,000.

1443.—The secretion of milk is quickly arrested. The spasmodic symptoms in this disease are very strongly marked from the commencement to the end; they are described as tremors of the muscles, and spasmodic twitchings of the voluntary muscles of the neck, shoulders and hind quarters. They pass off a few hours before death.

8. The preceding symptoms having lasted about 24 hours, diarrhoea sets in followed by dysentery. The evacuations are said to be slimy, liquid of a dirty yellow color, occasionally tinged with blood and tenesmus is described. The general symptoms now change. The fever passes away, the animal becomes cold, the extremities and spine being particularly so. The pulse disappears and breathing becomes short, quick, and painful. The discharges from nose and mouth become purulent, the faeces more offensive. Prostration rapidly gains, the animal lies down, twitching stops, and death speedily ensues.

The duration of this disease is stated to be from 12 hours to 5 or 6 days, and rarely 8 or 9; the percentage of deaths to seizures being 90.

I append a tabular detail of the symptoms of Khorah, Gootee, Puschima, and Rinderpest for the purposes of comparison.

It is to be remarked that no mention is made of swelling of the throat in either account of the latter disease. It is also to be noted that this symptom is not described by Mr. Rutherford in the Calcutta Epizootic, nor by Mr. Lambert in the Ceylon disease, though almost all other accounts of Puschima distinctly allude to it.

Comparative view of the symptoms of "Khorah," "Gootee," "Puschima," and "Rinderpest."

Stages and symptoms.	Foot and mouth disease, Khorah.	Gootee.	Puschima.	Rinderpest.
Period of incubation...	■ hours	Not known	A few days, 2	Seven to fourteen days.
I.—Prodromic stage	None described	Dulness and listlessness in action; dry and rough skin; short dry cough failing in milk.	Dulness and listlessness, refusal of food, failing in milk, rumlessness, neglect of calf.	Suspension of rumination, want of appetite, staring coat, failing in milk.
Duration	...	Lasts two to four days	Not noted	Not noted.
II.—Febrile stage				
Shivering	In some cases	In most cases	In some cases	In most cases.
Fever	Slight in most cases.	Severe	Remittent	Low type.
Temperature	Elevated	Much elevated	Elevated	Elevation but variable and transitory.
Skin	Rough, hot, and dry	Hot and rough horripilation,	Hot and dry or clammy, horripilation.	Hot and cold alternately horripilation.
Pulse	Not noted	Increased	Accelerated	Accelerated.
Respiration	Ditto	Accelerated	Ditto	Short and quick.
Appetite	Bad	Lost	Lost	Lost.
Rumination	Suspended	Absent	Absent	Absent.
Thirst	Increased	Intense	Accounts vary	Accounts vary.
Eyes	Water	Inflamed and water	Inflamed and water	Inflamed and water.
Nostrils	.....	Viscid discharge	Viscid, foetid discharge	Viscid, foetid discharge.
Mouth	Discharge from	Sticky discharge from, ulcers on lips sometimes.	Sticky foetid discharge from, ulcers on lips occasionally.	Discharge from, foetid, raw spots.
Mucosa	None	Hot and dry	Hot and dry	Not noted.
Cough	None	Occasional, short and dry	Occasional, short and dry	Occasional.
Tongue	None	Swollen covered with mucus.	Swollen, sometimes ulcerated at base.	Not noted.
Urine	High colored	Scanty and high colored	Scanty and high colored	Ditto.
Posture, &c.	.....	Head down, ears drooping, back up.	Head down, ears drooping, back up.	Head down, ears drooping, back up.
Lactation	Diminished	Much diminished	Much diminished	Much diminished.
Spasms	Absent	Absent	Occasionally present	Always present.
Glandular swellings	None	In some epizootics	In some epizootics	None.
Duration	Not noted.	Two or three days	One or two days	About 24 hours.
III.—Third stage, Eruption	Vesicular in clefts of hoofs, in mouth, and sometimes on other parts of body.	On pader, belly, between legs, sometimes all over body, vesicular.	None	None, exudation and cracks on skin.
Diarrhoea	Rare	Constant	Constant, foetid	Constant, watery, and foetid.
Dysentery	None	In most cases	In most cases	In most cases.
Fever	Subsides	Intermits	Becomes typhoid	Becomes typhoid.
Discharges	Disappear	Become purulent	Become purulent, foetid or sanguinous.	Become purulent.
Temperature	Normal	Diminished	Animal becomes cold	Animal becomes cold.
Lactation	Present	Occasional	None	None.
Excitation	None or slight	Great	Very great	Extreme.
Prostration	None	Considerable	Severe	Ditto.
Throat	Normal	Occasionally swollen	Frequent swelling	Not swollen.
Spasms	None	None	In some cases	In all cases.
Duration	Not noted	Three or four days	Two or three days	24 to 36 hours.
Duration of disease	Eight or nine days	Five to ten days	Four days	Three or four days.
Mortality	Slight	60 to 90 per cent	90 to 100 per cent	■ per cent.

VII.—*Post mortem appearances.*

These are carefully and minutely detailed in the accompanying table, in which the appearances are noted almost in the words of the observers in a methodical form. From this record it will appear that there is a remarkable similarity between the morbid appearances noted in Gootee, Puschiana, and Rinderpest. I have not been able to find any account of the dissection of a fatal case of "Khorah." The most important general inferences to be drawn from the table are—

1st.—That the most characteristic and severe morbid lesions are confined to the mucous membrane of the alimentary canal.

2nd.—That the respiratory mucous tract is affected in a less degree.

3rd.—That the glands in relation to diseased surfaces are diseased.

4th.—That the blood is altered in constitution.

5th.—That the skin is affected only in Gootee.

6th.—That the condition known as "Fardel bound" is frequently found in all these forms of disease, and

7th.—That no appreciable lesion of the nervous centres is detected except in Rinderpest, in which an excess of fluid is described. Mr. Gudgin also found this appearance very uniformly in his *post mortems* in Burmah.⁽¹⁾

8th.—This gentleman has also described a specific lesion of the small intestines at the site of the solitary glands and peyers patches. He describes "a yellowish exudation of the consistence of inspissated pus, and varying from one-eighth to two-eighths of an inch in thickness. On removing this deposit the tissue underneath showed points of ulceration with a margin of a bright red color." In the large intestine he also found patches of exudation and abrasion. The latter appearance I observed in Gootee, and in the small intestines I found the solitary glands enlarged and distended with secretion.

These appearances denote a similar but stronger eliminatory action in and near the glands of the intestines than what is observed in typhoid fever when the specific lesion is more a growth than an exudation.

The phenomena more resemble the morbid appearances in specific dysentery than in typhoid fever.

Tabular Statement

Source.	I.—EXTERNAL APPEARANCE.		II.—CRANIAL CAVITY.			III.—THORACIC CAVITY.			
	1. Condition.	2. Skin, &c.	1. Skull.	2. Membranes.	3. Brain.	1. Nares.	2. Larynx and Trachea.	3. Lungs.	4. Heart and vessels.
Long. Lamb Epizootic of 1853. Several cases.	Great emaciation.	Subcutaneous and intermuscular cellular tissue affected with purpurous inflammation.	Not examined.	Not examined.	Not examined.	Living membrane inflamed.	Mucous membrane inflamed, smallest ramifications of ganglionic inflammation.	Contained abscesses, infiltrated with dark brown fluid pus.	Heart softened and yellow, contained thick purulent exudation in coronary arteries, contained black blood.
Lambert. Oxton Epizootic of 1843. Several cases.	Not noted.			No note taken.			Inflamed and full of frothy mucus.	Inflamed.	Healthy, blood was coagulated blood.
Rutherford. Calcutta Epizootic of 1864. Several cases.	Not noted.			Condition not noted.		Mucous membrane inflamed, thickened and covered with exudation, abscesses observed and ova of filix.	Larynx inflamed, trachea lost, so.	No disease noted.	Blood grumous.
McLeod. more Epizootic of 1867. One case.	Rather emaciated.	Skin rough. A few crusts on the neck, belly and udder with surrounding redness, no pustules.	Healthy.	Congested.	Healthy.	Mucous membrane thickened and inflamed.	Living membrane red, covered with viscid mucus, subcutaneous tissue infiltrated. Tracheal mucous membrane congested in smallest ramifications.	Pleura healthy, lungs of a pink color, uniformly congested, slightly condensed, no impaction, vessels contained clots.	Pericardium healthy, heart contained firm dark clot, small white clot in right ventricle, clot extended to large vessel. Walls appeared fatty. Blood grumous.
Rinderpest from "Veterinarian" of 1st July 1857. Quoted by Dobson, p. 167. Several cases.	Not noted.		Healthy.	Increase of fluid in the ventricles and theca vertebralis.	Healthy.	Mucous membrane inflamed, covered with points of ulceration and streaks of lymph.	Larynx occasionally ulcerated, mucous membrane of larynx and trachea covered with a layer of lymph.	Healthy.	Healthy, blood was dark.
Veterinary Surgeon J. P. Gudgeon. Barnish Epizootic of 1866. Twenty-three cases.	Not noted.	Skin between hind legs presented redness or a few cracks and sores.	Healthy.	Membranes congested. Lateral ventricles and theca vertebralis contained an unusual quantity of fluid.	Healthy.	Schneiderian membrane intensely congested, of a deep red color, dotted over with raw spots. Points of ulceration or patches of exudation, more diseased posteriorly.	Living membrane congested and covered with exudation; exudation extends into the ramifications of the trachea.	No disease of Pleura or effusion, lungs emphysematous and invariably congested.	Mucous substance second, very empty, blood very dark, fluid, coagulating on exposure.

appearance observed in several species.

IV.—ABDOMINAL CAVITY.									
1. Mouth and Pharynx.	2. 1st Stomach.	3. 2nd Stomach.	4. 3rd Stomach.	5. 4th Stomach.	6. Small Int.	7.	8. Liver.	9. Spleen.	10. Kidneys.
Mucous follicles ulcerated, mucous membrane inflamed, detached, and shagreened, contained brown foetid food.	Excessively distended, mucous membrane inflamed in large patches.	Contained a dark green food staining it.	Contained a similar fluid, mucous membrane inflamed.	Mucous membrane inflamed.	Inflamed especially upper and lower part.	Contained lumpy green and yellow fluid.	Soft, dark, and livid, gall bladder moderately distended.	Enlarged, like a bag of blood.	Slightly congested.
Epiglottis, larynx, trachea, and bronchi, mucous membrane and mass of pus.	No disease.	Nothing particular.	Contained layers of hard food, "Farcled bound."	Inflamed.	Inflamed.	Inflamed and ulcerated, rectum & sigmoid flex.	Turpid and inflamed.	Nothing noted.	Nothing noted.
Tongue swollen, adherent to alveolar substance, mucous membrane thickened and covered with mucous perolent foetid secretion. Mucous membrane of pharynx inflamed, thickened and covered with grayish accumulation. Oesophagus inflamed.	Inflamed.	Inflamed.	Chronically "Farcled bound."	Deeply: mucous membrane red, dark red in patches, swollen and thickened, easily detached.	Inflamed similarly to but less intensely than stomach, occasional ulcers not with.	Empty and slightly inflamed, rectum much inflamed.	Highly congested and enlarged.	No disease.	No disease.
Mucous membrane of mouth, caecum, tongue of a live, covered with white secretion; membrane thickened.	Contained a small quantity of foetid green matter, alveolar and mucous membrane thickened.	Contained a quantity of dry and undigested food, red, looking.	Stuffed with layers of dry aliment, "Farcled bound."	Contained an enormous quantity of dry food, mucous membrane very dark.	Thum much congested, small nodular elevations on mucous membrane, containing whitish substance and surrounded by congestion.	Upper portion congested and pigmented, lower portion congested intensely and abscessed; mucous glands enlarged and congested.	Yellowish color and friable. Gall bladder distended with bile.	Enlarged adhering to stomach and diaphragm.	Pyramids congested, urine a dark color.
Mucous membrane of pharynx intensely inflamed, covered with a thick white pellicle, membrane thickened and inflamed. Tonsils, thyroid, and other glands of neck enlarged and congested.	Mostly healthy, epiglottis, tonsils, and other glands of neck enlarged and congested.	Mostly healthy, digestion and coagulation in some cases.	Contents dry and hard, "Farcled bound."	Mucous membrane highly congested and filled with lymph.	Inflamed and lined throughout. Peyr's patches sometimes covered with layers of lymph and were ulcerated.	Extensively ulcerated, aged and with deposit of lymph.	Healthy. Lining membrane of gall bladder covered with lymph.	Healthy.	Healthy.
Esophagus formed severely, lacerated, swollen, filled with lymph, multiple soft, showing points of extravasation. Fauces and pharynx highly congested and covered with grayish exudation. Soft palate congested with spots of extravasation. Oesophagus healthy.	Contained a quantity of soft food, mucous membrane healthy.	Contained a large quantity of soft food, mucous membrane healthy.	Contents in most cases soft, lining membrane healthy.	Lining membrane thickened and ulcerated, yellow deposits of lymph upon it, contents liquid.	Congested. Patches of yellow deposit in the neighborhood of Peyr's glands, occasional inflammation, sometimes abscessation, contents fluid.	Inflamed, covered with exudation of some cases ulcerated, contents solid.	Congested. Gall bladder full.	Friable, black, not enlarged.	Healthy.

VII. Zymology.

The diseases which have been considered in the preceding sections would come under the class of *Zymotic diseases*, or *miasmatic* in the present scheme of classification of human diseases. Their essential nature is expressed primarily in the following definition.

After an interval of longer or shorter duration has elapsed between the exposure to the specific cause of the disease and the appearance of its symptoms, certain phenomena indicating a general disorder of health appear. These are succeeded by a febrile condition of the body, which varies in degree and type according to the form of disease and general character of the epidemic, and is revealed by increase of temperature and certain definite disturbances of the functions of the body.

After this condition has prevailed for some time, certain specific lesions of the mucous or cutaneous surfaces or both are manifested in some cases accompanied by affections of the lymphatic glands in relation to these.

The constitutional symptoms now undergo a change, and within a certain time a fatal result from general exhaustion, or the termination of the disease, or the commencement of some special complication, or an engaging recovery, takes place.

What the origin or nature of the disease is, we are quite ignorant. In producing the specific symptoms in these several diseases is, we are quite ignorant.

Whether it is the same poison in different degrees of intensity or different poisons, we are unable to say. Their very existence is hypothetical, and is presumed from the character of the symptoms. The utmost we can say is that, from the fact of their being intensifying certain unsanitary conditions, and capable of being conveyed from one animal to another, and from one locality to another, there is a strong presumption of their existence, as substances capable when brought into relation with an animal of causing the disease. From the rapidity of the spread of the disease (1) we infer that they are very subtle and diffusible and most probably capable of being conveyed by atmospheric influences.* Their comparative virulence is inferred from the kind of re-action which ensues on their introduction into the body.

Thus the poison causing "Khorah," and cow-pox proper, is in the great majority of cases mild, producing no sudden or striking nervous re-action, involving little or no change or vitiation of the functions of the body, stimulating little or no destructive tissue changes, interfering to a very slight extent with secretions and quietly working out its own elimination through the channel which for an inscrutable reason it selects. The poison of "Gootee" is reckoned to be more pernicious, because the re-action is more severe. The nervous system is primarily attacked, and general dullness, uneasiness, and shivering evidence the poisoning agency. The functions are gravely involved, tissue change of a destructive character is soon initiated; secretions become depraved, and the elimination of the poison from its seats of selection is accompanied by violent local action; inflammation in all cases, abrasion and ulceration in many, and erysipelatous gangrene in some.

In "Puschima" and "Rinderpest" we have the extreme of virulence. In these diseases the action on the nervous system is so pernicious that poisoning may ensue at once without the development of any other organic disturbance.

When these, however, ensue, their severity, their rapidity, and their fatality are most marked, and contrast strongly with the other diseases.

On comparing the diseases described under the names of "Khorah," "Gootee," "Puschima," and "Rinderpest" with each other, a remarkable sequence is disclosed, so much so, that from the mildest case of "Khorah" without any constitutional symptoms and a very slight eruption up to the most severe case of "Rinderpest," a continuous series of morbid phenomena seems to run; the whole forming a natural group or succession of diseases with "Khorah" at one end and "Rinderpest" at the other. On the borders of each we may find cases which it will be difficult to know where to place, but from the general run of cases in an epizootic, the character of the disease is declared. Thus we may find a case of "Khorah" with severe constitutional symptoms, and a general vesicular eruption which in an epizootic of "Gootee" we should call by that name, or a case of "Gootee" with the mouth and foot lesions peculiar to "Khorah" which, unless the general run of cases were undoubtedly "Gootee,"

* After writing the foregoing I received Mr. Gullin, Veterinary Surgeon's Report on Cattle Disease in British Borneo. I have much pleasure in transcribing his remarks on "the nature of the disease" (Puschima) as quite coinciding with and confirming my own.

"This disease is a malignant and infectious fever of a typhoid character, attacking the mucous membranes of the body. It is analogous to or identical with the 'Rinderpest' now raging in England (1866). It exhibits the same symptoms, attacks the same structures, runs its course in the same period, is characterized by the same amount of mortality, and displays the same *post mortem* lesions.

"The membranes lining the air passages are always more or less affected, but the morbid lesions, so distinctive of the disease and so destructive to life, are found in the fourth stomach and large and small intestines. During the progress of the disease a specific disease poison is generated, which the system endeavours to throw off by the intestines. The excretions including the exhalations from the skin contain a subtle and virulent poison, capable of infecting other cattle (and probably all ruminating animals) if brought either by inhalation or direct contact with the mucous membranes of the body. There is little doubt that the poison contained in the exhalations from the skin and the alvine evacuations is diffused through the air to a considerable distance, and in a sufficiently concentrated form to infect other cattle. That it is infectious is proved by the history of outbreaks and confirmed by the testimony of the inhabitants of several villages, whose observations have extended over a series of outbreaks of the disease." XXXVI. p. 9.

we should call "Khorah." In an epizootic of "Gootee" we may find cases without any cutaneous eruption and with the glandular enlargements characteristic of "Puschima," and in the latter we may detect the typhoid or algide phenomena, the absence of glandular enlargements, and the presence of spasms.* As we ascend this series, the prominence of the skin eruption disappears, the severity of the diarrhœic phenomena increases. Glandular implications appear and then disappear, nervous phenomena become more marked and specific, putridity increases, the stages shorten, the type of fever degenerates, and the rate of mortality becomes greater.

There are also certain epizootics linking together the various diseases. Epizootics which may be called by one or the other name. The best example of this is the Assam epizootic which stands half way between Gootee and Puschima. A superficial account of this epizootic

(1) X, p. 5.

(2) XXIX.

(3) XII.

induced, Dr. Palmer to place it in the same category as the

mention is made of epizootics with an intermediate mortality or occasional eruptions.

This view is further strengthened by the history of excema epizootica and vaccinia in

England. The epizootic of 1839 of the former disease was more virulent and fatal than

(4) XXX., p. 84.

(5) XXXI., p. 267.

(6) XXXI., p. 272.

subsequent manifestations,(4) and the epizootics of 1745 and 1770 of the latter disease were so malignant and fatal as to attract the attention of Parliament,(5) though both diseases have recently been mild and comparatively harmless. Again a very important observation is recorded by Dr. Aitken,(6) as to ovine variola showing the unimportant nature of a cutaneous eruption as a pathognomonic feature. He says "the virulent form" of ovine variola "never produces pustules." He describes the skin cracking in a zigzag manner, and in Rinderpest cracks and sores of the skin are also observed.(7)

(7) X., p. 7.

A careful comparison of the symptoms and *post mortem* appearances of the diseases in question which have been summarized and stated without regard to any theory will be found to speak strongly in favor of this view, which appears to be the most reasonable and probable under the circumstances. Still as the degree of the symptoms is various and the mortality of the diseases so different, it is well that they should be kept apart, at any rate as different varieties: they resemble each other more than any one of them resembles any other disease of man or other animals, but at the same time they present differences which have been recognized by unprofessional and unskilled observers sufficient to justify their being described and still remaining apart as different diseases.

Comparative Pathology.—I shall now under this heading proceed to compare the salient points of these diseases with others, in order, if possible, to determine their position in a scheme of comparative nosology, a subject which is as yet in its infancy.

Khorah and Cow-pox.—These diseases differ in the specific site of the eruption, in the specific nature of the eruption, in duration of the stages, and in the changes to which the eruption on the skin is subject. Even the general eruption on the skin is different in the time of its appearance and the sequence of its changes.

The two diseases are evidently different species of miasmatic epizootic diseases.

Gootee and Cow-pox.—The greater severity of the constitutional symptoms of the former, the difference of the dates of appearance of the stages, the difference of the kind of eruption and its changes, the presence of diarrhœa followed by dysentery in Gootee and its absence in cow-pox, and the distinct character of the general eruption of the latter, separate these two diseases, whose only resemblance is the existence of an eruption and the presence of constitutional disturbance of a somewhat similar nature. They come under the same order, but are evidently different genera of disease.

(8) XXII., p. 274.

Dr. Aitken talks of *spurious* forms of cow-pox, whose nature he does not describe.(8)

Gootee and Small-pox.—These diseases present remarkable analogies. The general course of the disease, the duration of the stages and of the diseases itself; the salivation, the discharge from the eyes, the occasional diarrhœa, the sore throat, and the occasional involvement of the respiratory mucous tract present a group of striking resemblances.

On the other hand, the character of the eruption is different, the secondary fever is not described in Gootee, the latter disease is more "putrid" and the diarrhœa, which is succeeded by dysentery, more invariable. The diseases present strong analogies, but evidence is still wanting to establish their identity. None of the reports hint at the infection of man by

* The history of a recent epizootic in Assam strongly confirms this view. In this epizootic cases presenting all the phenomena of Puschima occurred. The symptoms of these are summarized by Dr. Inthurn as "numerous watery evacuations, prostration, death." Another describer of the same epizootic (Mr. Driberz) states that "in many cases an eruption called Boesant breaks out on the body." He also, under the name of suboka, alludes to what is evidently foot and mouth disease. From Major Lamb's letter there is some presumption that Puschima appeared at the commencement of the epizootic, and that subsequently "it assumed a quite different form," namely, Gootee. XXXV., 1, 2, 3.

Gootee or the infection of animals by small-pox, nor even of the simultaneous prevalence of these diseases. Moreover, when cattle have been infected by human small-pox, the disease goes through the characteristic stages of cow-pox.(1)

(1) XXXI, p. 271.

Puschima and Gootee and Plague.

Between the forms of Puschima and Gootee in which there is glandular enlargement and plague there are many analogies. The circumstances of country and climate in which these diseases respectively flourish, are similar viz., deltas; low, crowded, badly ventilated dwellings; a moist warm atmosphere, the action of putrescent animal and vegetable matters, and insuffi-

(2) XXXIII, p. 328.

(3) XIXII, p. 371.

cient and unwholesome food.(2) The season of year in which they respectively flourish (December to June) is the same.(3) The sequence and duration of stages are very nearly alike. The glandular lesions are very similar, only that in man the inguinal glands are

more prone to be enlarged: the type of the fever, the rapidity of spread, the mortality, the state of the blood are strongly analogous. In both there is a tendency to specific cutaneous lesions. Both may kill without the manifestation of any local lesion; both appear to be endemic diseases capable of becoming epidemic; both are considered highly infectious, and in plague as well as Gootee and Puschima, the characteristic secondary lesions may be suppressed, in other words, epidemics or epizootics which possess marked general similarities differ from each other in the kind and degree of local specific manifestations.

(4) XXXIII, p. 329.

There is an interesting observation by Dr. Milroy(4) to the effect that an epidemic of plague in Bughazi was preceded for two or three years by a virulent epizootic among cattle.

There are important differences also, namely, the more hæmorrhagic character of plague, the diarrhoea and dysentery and Puschima and Gootee, which are not recorded of plague, the nature of the cutaneous lesion when it exists in plague most commonly carbuncular, and the enlargement of the heart, liver, and spleen observed in plague. It is, however, to be noted that Dr. Long in Assam observed a very similar state of spleen to that recorded by writers on plague. The diseases are evidently closely allied though they present specific differences.

Puschima and Gootee and acute Glanders.

The principal analogy between these diseases consists in the enlargement of the glands of the neck in each and the discharge from the nostrils. They differ, however, materially in general course and symptoms, in the kind of cutaneous eruption and in the *post mortem* appearances. They are evidently different genera of disease, though both exemplifying the general miasmatic type.

Puschima and Cholera Morbus.

The comparison here is between the more sudden virulent and algide forms of Puschima without glandular enlargements (such as occurred in Ceylon, Calcutta, and Darjeeling), and cholera. The main points of resemblance are—

1st.—The liability to death following close on the first manifestation of symptoms.

2nd.—The algide phenomena.

3rd.—The profuse watery discharge.

4th.—The muscular spasms.

5th.—The co-existence of the two forms of disease in one locality and—

6th.—To a certain extent the state of the blood and *post mortem* appearances.

1st.—The algide stage of cholera precedes the febrile, while in Puschima it is the reverse.

2nd.—The discharges in cholera appear before or contemporaneously with constitutional symptoms, while in Puschima constitutional symptoms precede the manifestation of any local action.

3rd.—Vomiting is an essential feature of cholera not so of Puschima.

4th.—Tenesmus is absent in cholera, but is described invariably in Puschima, and—

5th.—Discharge of blood from the bowels is an invariable symptom of Puschima, if the case is developed and the animal live long enough, not so of cholera. These are important differences and militate against the opinion entertained and expressed by some that they are the same disease manifested through different channels.(5)*

(5) XV:

Puschima and Typhoid Fever.

The resemblances are—

1st.—The character of the Fever.

2nd.—The Diarrhoea.

3rd.—The *post mortem* lesions to a certain extent.

The differences are—

1st.—The duration of the whole disease and its stages.

2nd.—The skin eruption in typhoid and its absence in Puschima.

* Mr. Cockburn under the name of "Bhail" describes a disease which appears to be identical with cholera.

- 3rd.—The dysentery in Puschima while it is only spurious in typhoid.
 4th.—The specific intestinal lesion in typhoid involves primarily the solitary and agminated glands in a process of cell growth followed by ulceration. Other intestinal lesions are secondary and non-essential, while the intestinal lesion in Puschima is a general disease of the whole mucous membrane, of which any glandular phenomena are only a part.
 5th.—The febrile phenomena in Puschima are more evanescent than in typhoid.
 These differences separate the diseases to a considerable distance.

Gootee and Distemper of Dogs.

These diseases present very many and striking resemblances. They are both infectious, miasmatic diseases, presenting similar stages of very similar duration. In both the fever is of a typhous character. In both the alimentary mucous membrane is mainly affected and other mucous membranes secondarily, causing diarrhoea succeeded by dysentery. In both there is a skin disease, and individual symptoms such as water running from eyes and nose, cough, &c., are remarkably alike. I have not been able to obtain a very exact description of distemper, but the analogies above noted derived from a study of "Stonehenge's"

- (1) XXXIV, p. 614 chapter on the subject (1) are interesting and suggest further study.

The foregoing sketches go to show that while the diseases under consideration possess many striking resemblances to others when particular symptoms are considered, they are essentially sui generis, when a broad view of the whole detail and sequence of symptoms is taken and resemble each other more than they resemble any other disease or group of diseases.

IX.—Diagnosis.

From the minute description which has been given in Section VI. of the symptoms of Khorah, Gootee, and Puschima, there can be no difficulty in distinguishing them from each other and from other diseases. The eruptive nature of the disease, the description of eruption, and the sites which it selects, are sufficiently characteristic of Khorah to separate it from all other diseases of the foot causing lameness. As, on account of its epizootic and infectious nature, it is of importance to determine its nature, the cleft of the foot and inside of the lip should always be examined, and if *vesicles* are found in these sites there can be no doubt of what the disease is. As Khorah for the purposes of treatment must necessitate animals being laid up for some time and so involve considerable loss of work, it is of great importance to diagnose it correctly. If my surmise that the poison causing it is a milder manifestation of the same poison which causes Gootee and Puschima is well founded, then the importance of recognising this disease and using measures to check its progress becomes still more pressing.

Every case of sore, swelled or ulcerated foot, is not necessarily Khorah, and in diagnosing the disease from others, the manifest infectiousness, the eruptions and soreness of the mouth should be taken into consideration. Between severe cases of Khorah, with well marked constitutional symptoms and general eruption, and cases of Gootee, it will be difficult to distinguish. Lameness, the comparative severity of the general symptoms and mortality, will perhaps define the disease, but for practical purposes an exact diagnosis of such cases is not of such importance.

As there is a difficulty in diagnosing between individual cases of cases of Khorah and Gootee, so there will often be a difficulty in distinguishing in some cases whether they are instances of Gootee or Puschima. The distinction is to be drawn more from the general peculiarity of the particular epizootic than from the symptoms presented by any one case.

The main differences between the two diseases are—

- 1st.—The presence of a skin eruption in Gootee and its absence in Puschima.
 2nd.—The lower type of fever, and greater tendency to prostration in Puschima than in Gootee.
 3rd.—The earlier and more marked toror of the discharges in Puschima than in Gootee.
 4th.—The shorter duration of the stages and of the whole disease and earlier appearance of diarrhoea in Puschima.
 5th.—The more frequent occurrence of glandular swellings in the neck in Puschima than in Gootee.
 6th.—The presence of spasmodic phenomena in puschima and their absence in Gootee; and
 7th.—The higher mortality of Puschima than Gootee.

Between the severer form of Puschima as described by Mr. Rutherford and Rinderpest, there is very little difference, as will appear from a study of the table exhibiting their symptoms comparatively.

The spasmodic phenomena appear to be more severe and better marked in Rinderpest, and the febrile symptoms are of a lower type and more evanescent in that disease.

X.—Prognosis.

In *Klorak*, if proper care be taken and proper measures of treatment employed, the diagnosis is always good. (1) It is a mere local disease, requiring time and attention for its complete cure.

If any of the complications already enumerated are allowed to appear, the case becomes more likely to prove fatal.

If constitutional symptoms of any severity mark the epizootic, a certain proportion of deaths, not more than 25 per cent., may be looked for.

In *Gootee* a large proportion of deaths must always be looked for. As to individual cases the symptoms which would lead to an unfavorable prognosis are:—

- 1st.—Low type of fever.
- 2nd.—Early prostration.
- 3rd.—Early fœtor of discharges and early diarrhœa.
- 4th.—Scanty or no eruption.
- 5th.—When ulcers exist an unhealthy appearance of these.
- 6th.—Prolonged aversion to food and violent thirst.
- 7th.—Tight shrivelled skin.
- 8th.—Scanty and very red urine.
- 9th.—Early recumbency.
- 10th.—The occurrence of any complication.

In favorable cases the following presages may be noted:—

- 1st.—Mild fever of asthenic type.
- 2nd.—Relaxed skin and copious eruption.
- 3rd.—Clear discharges from eyes, nose, and mouth, void of fœtor or with a slight smell.
- 4th.—Bowels quiet.
- 5th.—Urine abundant and not of a very high color.
- 6th.—Return of appetite, of rumination, and slight thirst.
- 7th.—Healthy ulcers if they exist.
- 8th.—Absence of complications. Of all these signs perhaps the most significant and that most usually noted is return of appetite and rumination.

In *Puschima* at the commencement of an epizootic, a mortality of at least 90 per cent. may be looked for, later it may diminish to 50 per cent. Each individual case should however obtain the benefit of treatment, and by pursuing the plan which experience and analogy suggest as the most likely to do good, by watching the case carefully and taking advantage of every favorable opportunity, many cows which would otherwise die may be saved.

The unfavorable signs in this disease are, early cold, fœtor, dysentery and recumbency: The earlier these occur the worse the case must look.

On the other hand, if the heat of the extremities and spine is sustained, if the fœtor is not great nor the discharges in an evident state of decomposition, if the diarrhœa does not come on till the third day and is not shortly followed up by dysentery, if the animal stands—is not compelled to lie down, then the case wears a more hopeful aspect.

Severe spasms, especially if they have any regularity or system, may also be looked on as bad signs and their absence as good omens.

In Mr. Greenhill's cases, recorded by Dr. Palmer (2) picking a little food and an improvement in the state of the bowels were the earliest observed signs of recovery. The state and expression of the eyes and general appearance of the animal will also serve as indications of the nature and prospects of the case.

XI.—Treatment.

This subject may be considered under three heads:—

1st.—The avoidance of conditions which would render cattle more liable to be attacked by epizootics.

2nd.—The means which ought to be pursued to prevent the spread of epizootics when they appear in a locality or neighbourhood.

3rd.—The medicines and modes of medical treatment which should be applied in the several forms of disease under discussion.

1. In every epidemic and epizootic, it is the poor, the diseased, the filthy, and the overcrowded which most early and most surely succumb to the influence.

At all times, then, cattle ought to be kept up to the greatest standard of health and comfort possible under the circumstances.

(a) The quality of the stock should be sustained and improved:—

I.—Avoiding breeding in and in, that is, allowing near relations to have sexual connection and to propagate the kind.

II.—Preventing too young bulls from covering.

III.—Obtaining bulls from a different locality and of a good stock.

IV.—Breeding should be adopted and encouraged as much as possible in preference to buying and selling, which greatly increases facilities for the spread of epizootic diseases.

(3.) Animals should not be set to work too soon, nor cows allowed to have calves too early.

(c.) Great care should be taken not to overwork cattle.*

(d.) They should not be crowded in small confined barses, and these ought to be dry, clean, and well ventilated.† The situation of cattle sheds should be carefully selected to avoid damp and malarin.

A raised bamboo machan covered with straw ought to be provided in *bleeds* and damp places, when cattle are removed from the barses to plough or assist in gathering in.

(e.) When they get wet with water or perspiration they should be rubbed dry.

(f.) The food and drink must be carefully looked to.

Early rain grass, after the cattle have been used to dry food, is very injurious. Malarious pastures, coarse grasses, and old straw are very injurious, and the muddy water of wheels and foul tanks should never be given as drink.(1). Green grass (except at the beginning of the rain-) when it can be obtained, short dry pasturage, and wholesome hay and rice straw should be given as food.‡ The heart

(1) XXXVI, p. 2.

(2) VI.

of the plantain tree or young plantain leaves chopped fine and small, boiled or broiled; (2) gram and boossie, paddy or oil cake, if they can be afforded can also be given in small quantities as aids to other coarser fare. Good tank, river, or well water should be supplied for drink with the same regard to their quality as if they were intended for man.

2. When an epizootic threatens cattle should be especially looked after. The greatest care should be taken not to permit the access of a diseased animal or of an animal from a diseased neighborhood. The propriety of this caution is evident from the instances mentioned by the Magistrate of Backergunge already cited. Mr. Lambert writing of the Ceylon epizootic, says, "the immunity" from disease prevailing in the neighbourhood "enjoyed upon this estate was attributed to the nature of the food, to the absolute isolation in which the stock was

(3) See also X., p. 12, to the same effect. kept, and to the care bestowed upon them."(3) The feeding, housing, and general care of the animals should be more solicitously looked to than ever.

Cattle should be carefully kept away from roads and routes frequented by cattle travelling from one district to another.

Buying and selling should be suspended or prohibited, and if any cattle are bought, they should be kept away from the others for at least twenty days.

Intercourse of all kind with affected villages should be as limited as possible, and if the disease come into the immediate neighbourhood, temporary hospitals should be constructed for sick cattle in out-of-the-way places.

Inquiries should also be instituted as to the approach and direction of spread of the disease and means adopted to avoid it.(4) There is reason to believe that if one diseased animal frequent a pasturage, it becomes a source of infection, and this should be held in mind.

(4) XXXVI, p. 27.

3. When the disease actually breaks out, the diseased animals should be separated from the healthy, and the latter removed to some locality where no disease exists, and if disease still appears, the process should be repeated until no more cases occur(5).

(5) XXIX.

Mr. Caleb Ladd describes the measures which, at the suggestion of a Veterinary Surgeon, he adopted on the appearance of Pashmina on his farm. He removed all the diseased animals, burnt all the old straw and manure about the cow house, all the straw in the house and the house itself. He then removed all the unattacked animals to a new house on the other side of his garden and the plague was stayed. Mr. Ladd remarks that if these precautions, namely, removing all the stock as soon as one is attacked, and if the diseases follows, removing to another place and burning the refuse of each place, were adopted in every instance, he thinks the disease would altogether disappear.(6)

(6) VIII, para. 7.

Mr. Sayers says that the disease, Gootee, appeared among a herd of forty-six of his buffaloes, of which two were attacked. He remarks,—"I immediately detached these two and removed the entire herd from the locality; only one more case occurred."(7)§

(7) VIII, 2.

* And not to work them too long without food. Cattle are apt to injure themselves by surfeit when not fed at proper intervals.

† The sheds should be cleaned daily. The floor should be of dry earth well pressed down (XXXVI, p. 2), or still better, pucca, sloping on either side in order to allow water or urine to drain away. Dry grass or straw should be given for a litter.

‡ This should be chopped up and given with water. The addition of a little salt renders the mash more wholesome.

§ To these may be added two instances recorded by Veterinary Surgeon J. P. Gudgeon in Burnah. In one village after suffering severely from the disease, the inhabitants sent the remaining cattle to a jungle seventeen miles away and the disease disappeared. In another case the plan adopted was that the sick were separated from the healthy, and the latter sent miles away into the jungle. After doing this the disease died out.

Another case is very interesting. "Swatay, no disease here. In anticipation of being attacked they had sent their buffaloes to a grazing ground beyond a range of hills, about ten miles off." XXXVI, page 8.

With these instances of success in support of the propriety of this measure, ■ should invariably be resorted to.

In some places, indeed, it is invariably adopted(1), and its importance cannot ■ over-

(1) XXIV, 3.

rated. Whenever therefore, when an epizootic is known to rage in the neighbourhood of a locality, any cow is noticed to look ill and be off its feed, it should be at once removed, and the rest of the herd sent elsewhere.*

The Civil Surgeon of Backergunge recommends cattle sheds to be well cleaned out and large smoking fires lighted daily for an hour or two(2). I am convinced,

(2) XIII, 1.

(3) XXXVII, p. 2.

however, the safest plan is to burn the whole concern(3), and that in most cases involves very little loss. If the place is pucca then ■

(4) X, p. 4.

should be carefully cleaned and fumigated in the manner described and not used again for three months at least.(4) I shall here transcribe Dr. Palmer's excellent sanitary directions. He writes, "prompt and complete separation of the healthy from the affected or suspected cattle is to be enforced.* * * When it is practicable to remove the unaffected cattle, we believe this proceeding the more likely to be successful in checking the disease. * * * Straw, dung, hay, trough and such like should be removed, burnt, and disinfected; the stall in which the animal stood should not be used again, but thoroughly cleansed out and disinfected. * * * All animals dying should be buried without a moment's delay, not skinned, and no animals should be allowed to approach the burial ground until some time has elapsed since the last interment."(5)

This last direction is of the utmost importance. When we consider that the animal body, diseased or dead, contains material sufficient, under favoring circumstances, to infect many others, the greatest possible care in neutralising and removing this source of disease is imperative. All traffic in hides should be carefully abstained from.

Dr. Palmer recommends the use of McDougall's disinfecting powder, but in its absence quick lime may be employed, not as a mere cover for impurities, but as an agent that may destroy any organic residue which may have escaped careful cleansing.

The question of inoculation has still to be decided by experiment, though at present presumptions are rather against than for it.

As the diseases are quite different from cow-pox, notwithstanding Professor Symond's opinion, as to their ariolous nature, vaccination would, in Gootee and Puschima, in all probability, be perfectly useless. This has been determined in England by experiment.

The only question is whether, if the cattle of this country generally were inoculated with the contents of the vesicles of Gootee or the salivary discharge, tears, or serum of the blood of Puschima, a saving of stock would be effected on the whole.

Two indisputable facts are in favor of this measure.

1st.—That an inoculable disease poison when admitted into the body through the skin does not produce such a severe sequence of symptoms as when absorbed by mucous membranes.

2nd.—That a modified form of disease can be obtained by successive inoculations from animal to animal.

This has been extensively demonstrated by experiment, and the experience of vaccination from man to man confirms the truth of the statement.(6)

(6) XXIII, p. 303.

The subject is now under investigation and experiment in Europe. Inoculation has been practiced on a large scale with the Rinderpest poison in the Steppes of Russia "its home," with the result that only a trifling percentage of cases have died, and the animals subjected to the process though exposed to every source of infection have not again contracted the disease.

Beyond the Steppes results have not been so favorable, and it has been found necessary to subject 13 to 15 animals to inoculations successively ere the virulence of the poison was sufficiently reduced, and the rate of mortality brought down to a small percentage,(7) in other words, in the technical language of inoculators, "in other races of cattle the virus must pass through 13 to 15 generations before inoculatory matter that produces a mild form of disease is obtained."

(7) XXVI, p. 13.

If the operation is to be tried in this country the following precautions are indispensable:—

1. The proceedings must be under the control and strict supervision of a professional man.

2. They ought to be conducted apart from where healthy cattle might be infected.

3. The virus must be primarily obtained from a mild case of the disease, Gootee or Puschima.

4. A sufficient number of animals must be successively inoculated until the symptoms become mild.

5. When the requisite degree of modification has been reached, cautious trials should be made at first on a limited scale.

* A yard's separation as in some cases in Burmah ■ not enough. The separation must be measured by ■ it is well ■ split large herds up into smaller sections. (XXVI, p. 6)

Goats and sheep should also be subjected to inoculation, with a hope that mitigation of the virulence of the poison may be more rapidly and completely accomplished by that means.

These proceedings cannot obviously be left to private zeal or interest. To carry them out thoroughly and properly, demands an expenditure and resources which no private individual can command.

The losses occasioned yearly by cattle diseases have become a matter of imperial solicitude and interest. A successful solution of the propriety and power of inoculation can only be accomplished by direct imperial action.

The end to be attained is at the cost of a trifling mortality of one or two per cent. to protect all the cattle of the country, against a disease that carries off 80 to 90 per cent. wherever it appears. Evidence from many quarters tends to show that virulent epizootic visitations are becoming more and more frequent, and that often agriculture, which is the very life of the country, is paralysed by these outbreaks.

The time has come when the matter must be looked full in the face. I am convinced that mere written directions are as unavailing in this matter as in the matter of human vaccination, and that a comparison of the cost of yearly losses by cattle disease and the cost of a well devised set of experiments to test the question of the practicability and protective power of inoculation, and perhaps eventually of machinery to apply, throughout the country this protective power, will show a balance in favor of the latter. The subject is a highly important one in many respects, and appears to be gradually forcing itself more and more into such a position that something *must* be done.

In dismissing this subject, I would enter a strong caution against the fancied resemblance between Gootee and Cow-pox inducing any one to attempt inoculating man with the matter of the Gootee vesicle, a proceeding which had caused the death of the individual experimented on.

3. The medicinal treatment will be more instructively given under the head of each disease separately.

(a.) *Khorah*.—In mild cases the treatment is almost purely local. The simplest treatment recommended and employed for this disease is keeping the animal standing for several days in soft mud. (1) This is said to be a very efficacious mode of treatment, and is that generally employed by the natives. It has the advantage of effectually warding off flies, the source of one of the worst and most fatal complications and so tends to limit the mortality. If this method is employed it must be carried out carefully and completely.

fully and completely.

If the mouth becomes sore, the best application is—

Alum	...	...	...	1 ounce.
Water	...	...	...	1 quart.

To be applied with a sponge or cloth, thrice a day.

The foregoing may be called the *wet cure*. It is principally employed in, if not peculiar to India, elsewhere *dry method* are pursued.

The feet are well washed. The animal is kept carefully from moisture, and tar, Kurrunj oil, (2) camphor and oil, (4) (as much camphor as will dissolve in hot oil) sulphate of copper (2 ounces, treacle (goor) 8 ounces, to be heated till the substance assumes a red color,) &c.,

applied.

If constitutional symptoms are severe, a saline purge should be administered such as—

Epsom salts	...	...	...	8 ounces.
Common salt	...	...	...	8 "
Ginger	...	...	...	2 "
Water	...	...	...	1 quart.

If febrile symptoms continue, the following may be given—

Black antimony	...	...	...	2 drams.
Black salt	...	...	...	3 "
Nitre	...	...	...	2 "
Water	...	...	...	1 pint.

(4) III. p. 1.

To be given twice a day. (4)

Complications require special treatment.

*1. Ulcers on the mouth or udder are to be treated with the alum lotion already given or sprinkled over with desiccated alum (alum pulverised by heat which drives off some of the water in combination with it). This is best done by holding it over a flame in a spoon or similar receptacle.

2. Ulceration of the foot and destruction of the horny matter is best treated by scrupulous cleanliness, paring off shreds of horn, poulticing and the application of the sulphate of copper in substance, if the ulcer is foul and fungating, or in liniment according to the formula already noted. If the ulcer is deep and unhealthy looking, strong nitric acid should be applied with lint, followed by poultices and lotion of sulphate of zinc (5 grains

to the ounce) or sulphate of copper (10 grains to the ounce): neem or indigo water may be used in this stage. To ulcers of the mouth a lotion of nitrate of silver (grains ii. iv. to 1 ounce) is a good application.

3. The development of maggots is better prevented by the use of the means already indicated than cured. If they do appear they should be carefully extracted. Yellow wash (corrosive sublimate grains 4 to 1 ounce of lime water) should be applied till the ulcer become healthy, and then some of the weaker astringent lotions. Scrupulous cleanliness and the careful protection of the ulcerated surfaces by cloths and bandages are necessary. Corrosive sublimate may be applied as a powder well diluted with flower or chalk. Diet in this disease should be simple and nutritious.

8. *Gootee*.—In treating this disease general remedies are of primary importance and local remedies secondary, the latter will be very much the same as those indicated under Khorah according to the symptoms presented. When I add that sponging the surface over frequently with warm water, or warm vinegar and water during the second stage, will materially assist the development of the eruption and the cure of the disease. I have said that is necessary on this head.

Two special modes of treatment which have been confidently recommended in this disease first demand attention. The earliest is that of Mr. Piddington, (1) who recommends separating the dull cattle from the healthy

(1) XXVI.

on the appearance of an epizootic, and subjecting both separately to the vapor of muriatic acid. He describes the process thus:—“In a stable containing 30 or 40 head of cattle, a plate full of warm salt is placed upon a few hot embers in an earthenware dish. Over this is poured about an ounce of concentrated sulphuric acid. A thick white smoke, which is highly pungent and suffocating, instantly arises, and the operator must carefully avoid breathing this, for it may occasion spitting of blood or even disease of the lungs. He should quit the stable immediately, shutting the door close. The windows, &c., must have been closed beforehand; the cattle will take refuge at the end of the stable and much coughing will be heard amongst them. The stable may be kept closed for 8 or 10 minutes or even more if there is not much coughing heard. This process is repeated in the evening and so on for three or four successive days.

This measure, he asserts, has constantly stopped the disease among his cattle. It is simple, inexpensive, and should certainly be put in practice when a suitable place can be found.

The other special method of treatment is that recommended by Captain Chambers, Assistant Commissary General at Dinapore, (2) who states that according to his experience the black salt (karee neemuck or lobun)

(2) VII., 7.

of the bazaar is an “infallible specific in this disease.” The dose to be employed is one ounce (half chittack) twice a day in cases of the disease, and when the disease breaks out in a flock, he advises $\frac{1}{2}$ to 1 an ounce to be given daily to all the cattle as a preventive. He says that when fairly tried he has never found this remedy fail, and adduces a striking instance communicated to him by a planter who had lost forty bullocks of a herd of eighty, and after commencing to employ the karee neemuck did not lose another animal. He also states the addition of tartar emetic (sixty grains to one ounce of karee neemuck) improves its action. This mode of treatment should certainly be tried and its efficacy put rigidly to the test of experiment.* The foregoing methods are probably equally applicable in Gootee and Pusthima, and may be tried in both. It is not clear from the papers referred to in what form of disease they were found useful, and it still remains to determine their exact value and place. There is an almost utter want of experience on this subject, and any plan offering a fair chance of success should be put in practice without hesitation, either until it is found wanting or another better method suggested or demonstrated.

The treatment which has been recommended most commonly, perhaps on the ground of analogy and probability, is the following:—

- (a.) Saline purges in the first stage.
- (b.) Saline diaphoretics and diuretics in the second stage.
- (c.) Astringents, tonics, carminatives, and stimulants in the third stage.
- (d.) Easily digested and nutritious food throughout the disease.
- (e.) As a saline purge the formula already given under Khorah may be used, or common salt to the amount of 1 lb. to 2 lbs. may be given, or still better

Epsom salts	...	...	...	8 ounces.
Sulphur	...	...	...	4 "
Powdered ginger	...	...	...	1 "

Water, beer, gruel, or rice water, 1 quart to make a drench.

Saline purgatives are principally used in order to produce a copious and complete evacuation. This in the early stages of the disease may clear away the poison, or render the body, by having its excretory channels stimulated, more capable of voiding the morbid material from the circulation. There is reason to believe, however, that saline purgatives act principally on the lower bowels, and if there is any cause for suspecting that the first or third stomachs are

* Here I ought to place the plan adopted by Dr. Jackson of Dalsora successfully in four cases, namely, the application of cotton seeds to the sides in order to excite profuse suppuration. XL, 2.

over distended with food, or to apprehend the caking of aliment in the latter, one or other of the following doses should be administered, the latter by preference.

Boiling water	...	...	16 ounces.
Aloes	...	...	2 "
Carbonate of soda	...	...	2 "

Dissolve.

To 10 ounces of this add 10 ounces of Epsom salts and administer with beer or gruel.

Linseed oil	...	...	1 pint.
Croton "	...	...	10 drops.
Oil of turpentine	...	...	2 ounces.

Mix.

These should be given slowly, especially the latter, as when so administered, it finds its way to the third stomach without entering the rumen or paunch.

(b.) During the second stage the following may be given:—

Antimony	...	...	1 drachm.
Nitrate of potash	...	...	4 drachms.
Black salt	...	...	4 "
Sulphur	...	...	1 ounce.
Beer, gruel, or rice water	...	...	1 quart.

to make a drench, which is to be given twice a day.

Sulphur determines to the skin and bowels, and in this disease fulfils the indications of nature.

(c.) In the third stage, camphor should be largely employed as a good stimulant, opium and bharg as a good sedative and astringent, gentian or cherretta as a good tonic, and ammonia, ginger, carraway or pepper as stimulants.

The following formulæ will be found useful:—

Camphor	...	...	1 ounce.
Bhang	...	...	4 ounces.
Carbonate of ammonia	...	...	4 drachms.
Brandy or spirit	...	...	1 pint.
Gruel, beer, &c., to	...	...	1 quart.

A drench.

(1) X. p. 11.

To be repeated twice or thrice a day. (1)

Camphor	...	...	2 drachms.
Gentian	...	...	2 ditto.
Opium	...	...	1 drachm.
In gruel	...	...	1 quart.

A drench, to be given twice a day, or

Camphor	...	...	2 drachms.
Cherretta	...	...	1 ounce.
Powered ginger or pepper	...	...	2 ounces.
In gruel, &c.	...	...	1 quart.

A drench, to be given twice a day.

Similar formulæ may be devised according to the symptoms presented or the means at disposal.

If a more decided astringent is indicated or desired, any of the following formulæ given by Dr. Bensley of Backergunge will be found useful.

Decoction of Indurjub made by boiling 8 ounces of the seed in 24 ounces of water for half an hour	...	...	4 ounces.
Chalk	...	...	½ ounce.
Opium	...	...	1 drachm.

Mix and give this as one dose.

Repeat every two or three hours according to purging.

Decoction of unripe bael, eight ounces of the fruit to twenty-four ounces of water

Catechu	...	...	4 drachms.
Opium	...	...	1 drachm.

To be given every two hours till purging is brought under control.

Gum	...	...	2 ounces.
Sulphate of copper	...	...	2 drachms.
Water	...	...	8 ounces.

boil for half an hour, add opium one drachm, and repeat every three hours if necessary.

(4.) During the whole course of the disease nutritive drenches should be frequently administered, oatmeal gruel, rice water, arrowroot and water,

(5) XVI. a. "fulka" root with thin rice gruel (2), boessie and water, suttoo and water, or any of these with whey, &c., and when the cow shows any inclination to eat the finest grass, thoroughly cleaned, should be given.*

* Care must be taken not to allow the animal to satisfy its urgent thirst too copiously, otherwise death is accelerated (VI.)

Mr. Grote, the President of the Agricultural and Horticultural Society, writes :—The result of my observations this year was to expect recovery if the patient could be supported with liquid food during the crisis of this disease—"Gootæ." (1)

(1) XIII.

The complications of the disease are treated on general principles, always keeping in mind the serious and depressing nature of the main disease, and dealing more largely in stimulants than in the simple disease.

1st.—There is always more or less bronchitis which, according as it is limited to the windpipe or extends into its sub-divisions, is a less or more severe event. The most important remedial agent is counter-irritation or vesication along the windpipe; this can be best produced by one of the following :—

Oil of turpentine	} Equal parts.
Liquor ammonia	...	...	...
Olive oil	...	...	...

To be rubbed in along the course of the trachea.

Croton seeds	...	...	...	1 ounce.
Oil of turpentine	...	...	...	12 ounces.

Steep for a fortnight and then pour off the clear liquor. It can be used similarly to the last dose, or diluted with half the quantity of olive oil. (2) If the inflammation extend to the lungs, those applications should be rubbed freely over the chest.

(2) XXX. p. 2.

At the same time the following may be given—

Sweet spirits of nitre	...	...	4 ounces.
Powered opium	...	...	2 drachms.
Powder of ipecacuanha	...	...	1 drachm.

one ounce to be given for a dose twice a day in warm gruel.

If the lung disease assume the form of Pneumonia then counter-irritation over the site of pain and abnormal physical signs should be decidedly employed. The best agent for that purpose is the last of the two formulæ above given, with a proportion of 1 part of croton seeds to 1 of turpentine instead of 1 to 12.

2. Ulcers will be treated on the same principles as in Khorah. Scrupulous cleanliness, exclusion of flies, and if they present symptoms of weakness or delayed healing, solution of sulphate of zinc, sulphate of copper, &c., are the main points.

3. The state of "Fardel bound" is best met by the judicious employment of purgatives at the commencement of the disease. If it is indicated later in the disease, the purgative, and especially an oily one, administered as directed should be repeated.

4. Tympanitis is treated, if slight, by an oily purge, linseed or castor oil, followed by strong carminatives, such as carraway, assafoetida, ginger, &c., with opium or bang and ammonia. A good remedy is $\frac{1}{4}$ of a pound of mustard given in a quart of warm water.

If the case is severe, tapping the stomach or the introduction of a tube into it by mouth should be at once resorted to.

During convalescence, particular care should be given to the diet, which must be nutritious and digestible, at the same time a surfeit must be carefully guarded against.

Tonics as sulphate of iron (2 to 4 drachms) and gentian or cherretta should be given occasionally.

Puschima.—After having gone into such detail into the treatment of Gootæ, little remains to be added as to the treatment of Puschima, which must be based on the same system. The more depressing nature and rapid course of the disease should be borne in mind, and nutrients and stimulants are more clearly indicated. These with counter-irritants to the right side, chest, throat, and spine constitute the essence of the treatment.

Oil of turpentine	...	...	...	1 ounce.
Croton oil	...	...	...	1 "
Liquor of ammonia	...	...	...	1 "

is a quick and effective counter-irritant.

If the throat symptoms are severe, counter-irritation should be especially applied all round the larynx, and a solution of nitrate of silver (1 scruple to an ounce) should be applied to the root of the tongue and fauces.

In the third stage camphor should be used largely with a small addition of opium, asafoetida, and capsicum.

Chlorate of potash and common salt might be dissolved in the drenches given for food as antiseptics.

In this as in the last disease the great object of all treatment must be—

First, to support the animal's strength in order to enable it to pass through the inevitable stages of the disease; and *secondly*, to meet special symptoms or complications which may threaten to cut life short during its progress.

NOTE.

SINCE completing the above, I have been fortunate enough to obtain the elaborate and excellent Report of the Royal Commission appointed to investigate the cattle plague in England. I might with advantage introduce many of the interesting observations on this disease made by such men as Drs. Sanderson, Murchison, Marcet, Beale, &c., at the instance of the commission, into the text; but I think it better to let it stand as an independent record of the disease, as observed in India, drawn entirely from Indian source of information. At the same time it will be valuable for purposes of comparison to cite shortly, under the principal heads, some of the conclusions arrived at by the painstaking inquiry of the commission.

Symptoms and pathology of the disease.—Under this head I shall give Dr. Murchison's summary.

"1. The cattle plague now (2nd January 1860) prevalent in Britain is the same disease as the *rinderpest* of German writers.

2. The chief symptoms of the disease are, fever with general depression; an aphthous condition of the interior of the mouth and nostrils, an eruption composed of roseolar patches, scabs, and sometimes pustules and petechiæ on the skin, running from the eyes, nostrils and mouth, suppression of milk, constipation followed by diarrhœa, albuminuria and hæmaturia (bloody urine), and the ultimate development of a condition similar to the "typhoid state" of human maladies.

3. The chief morbid conditions found after death are the eruptions on the skin, and in the interior of the mouth catarrhal or croupal inflammation, and even gangrene, of the mucous membranes, ecchymoses, an unusually dark colour of the blood, a peculiar odour, and great proneness to decomposition.

4. There is no resemblance whatever between cattle plague and the typhoid or enteric fever of man in their anatomical lesions, their clinical history, or their etiology. All arguments derived from the supposed identity of these two maladies are therefore baseless.

5. Cattle plague is equally distinct from human typhus, scarlet fever, erysipelas, influenza, or dysentery.

6. Cattle plague belongs unquestionably to the same class of diseases as the human exanthemata, such as variola, scarlatina, and rubcola.

7. Small-pox is the human malady which it most closely resembles; this resemblance hold good, not merely, to a great extent, in the cutaneous eruptions of the two diseases, but in their symptoms and anatomical lesions, and in their extreme contagiousness, and capability of propagation by inoculation.

8. The resemblance between rinderpest and variola is sufficiently striking to demand immediate inquiry, whether vaccination or an attack of ordinary cow-pox confers future immunity from rinderpest, or modifies its course. The result of such an experimental inquiry can alone determine the identity or non-identity of the two diseases; but if the reply to the inquiry be in the affirmative, a certain method of arresting the spread of the cattle plague will be placed in our hands."

A supplement to this summary adds, "the obvious inference" from some experiments "is that, notwithstanding the close analogies between the cattle plague and human small-pox, the former disease like the so-called small-pox of sheep is uninfluenced by ordinary vaccinia, and like it therefore, is in all probability a distinct species of disease from human small-pox." (Third Report, Appendix, p. 79.)

The foregoing is extremely interesting as showing—

1. "That the cattle plague of England resembles our "gootee" even more closely than it does "puschima." This is still more clearly brought out by the detailed report in which the analogy (identity?) is pointedly discussed.

2. That the analogies between this and human diseases pointed out at p. p. 23, 24, and 25 of the text are amply confirmed; more particularly the non-identity of cattle plague and typhoid fever, and the strong similarity of the former and small-pox. Dr. Murchison says:—"The changes which take place in peyer's patches are obviously the result of the general intense inflammation of the mucous membrane. There are no sub-mucous deposits, and none of the lesions running through definite stages to ulceration which I am familiar with in the typhoid or enteric fever of man." An opinion exactly identical with that which I was led to from a study of the Indian Cattle Plague.

3. It will be remarked that in the descriptions of rinderpest, from which I drew the condensed account given in the text, a cutaneous eruption is not described. This must have been owing to either superficial examination or accidental omission; for Dr. Sanderson, who specially investigated the symptoms of cattle disease, not only himself describes an eruption in the form of thickened patches of epidermis, excoriations, papules, crusts, pustules, and tubercles, but quotes a long array of continental pathologists to the same effect. A skin eruption is then an essential feature of rinderpest, and its absence exceptional, and puschiema, if it is really void of a cutaneous eruption, which I doubt, is in that particular different from rinderpest,—a remarkable fact quite opposed to the opinion hitherto held on the subject in this country on high authority.

4. The spasmodic phenomena mentioned in the preceding pages, though not specified by Dr. Murchison, are described by numerous authorities.

5. The swellings of the neck recorded in so many accounts of gootee and puschiema appear to be peculiar to this country, as they are not mentioned by any other authority which I have consulted.

Infectiousness.

"We adhere then to the opinion we formerly expressed, that the true mode of preventing the spread of the cattle plague is to treat it as an entirely contagious disease. We believe this expresses the whole truth; but if it be not so, if some other conditions of which we know nothing, favour or restrict its spread, this does not remove our obligation to act on what is ascertained with certainty." (Third Report, p. 8.)

Inoculation and Vaccination.

"The substitution of a mild for a fatal disease, as of cow-pox for human small-pox, has naturally been hoped for in cattle plague. It will be seen in the report of Dr. Sanderson, and appears also from experiments tried at the Royal Veterinary College, that the vaccine virus, whether taken direct from cows, or after passing through the human body, has no effect on cattle plague, and that human small-pox and the virus of the small-pox of sheep (variola ovina) have likewise no influence. The virus of cattle plague, after transmission through the bodies of sheep and goats, returned into the body of an ox, is found to have lost none of its intensity. Repeated transmission of the virus through cattle weakens its power, but in no very sensible degree. At present the vehicle of the poison, whether it be blood, serum or mucous discharge, appears also to influence its action little, if at all, while mere dilution has no effect whatever. In fact, all attempts either to weaken the power of the cattle plague poison, or to find another agent which might make the system of the ox insusceptible to it have entirely failed." (Third Report, p. 9.)

Treatment.

"But, although as respects the value of drugs, the evidence is merely negative, this is not the case as to diet. The information obtained by the Edinburgh Cattle Plague Committee shows that by judicious feeding with soft mashes of digestible food, the proportion of recoveries has been considerably and in some places very largely increased. This is consistent with the pathology of the disease.*** It does not appear that any advantage is to be obtained by giving large quantities of stimulants. * * * We must close this section of our Report with the admission that in this as in other countries no drug has been found which can be recommended as either an antidote or a palliative." (Third Report, p. 12.)

From KENNETH McLEOD, Esq., A. M., M. D., Civil Assistant Surgeon of Jessore, to
H. L. HARRISON, Esq., Junior Secretary to the Government of Bengal,—(No. 655,
dated Jessore, the 13th November 1867.)

I HAVE the honor to forward my paper on Cattle diseases.

2. I send two compilations, one of a more detailed and the other of a more concise description.

3. In the first, I have gone as thoroughly into the subject as I could. Having determined upon a definite plan of writing every fact of importance which I found in the papers submitted to me by Government, or in other records which I had access to, is put down in its proper place.

4. By arranging all the numerous references in numerical order, in a consecutive list, I have been enabled, by simply quoting their number on the list, to effect a great saving of space, and to shew what authority or authorities I have for my statements.

5. In composing this paper I have made as much use of scientific terms and digressed as much into scientific discussion as I considered necessary to render the subject as complete as possible.

6. From the information placed at my disposal, I have been enabled to draw up a tolerably accurate and complete account of the epizootics which are destroying the cattle of Bengal, and when any points are doubtful or require investigation, and less remains to do in this direction than I anticipated, I have indicated them pointedly.

7. The shorter paper was written after the longer was completed, and is that which I have composed for translation.

8. It contains the essence of the other paper without reference or discussion, and is a simple exposition of the subject in unscientific and plain language, with plain rules for treatment.

9. In order, however, to render the pamphlet as practically useful as possible, I have in three pretty lengthy appendices given—

(a.) A short statement of the nature, symptoms, and treatment of the principal diseases of cattle;

(b.) A list of the best medicines, their actions, uses and doses, distinguishing those that can be had in native bazars; and

(c.) Eighty-six simple prescriptions, arranged according to the action of their principal ingredient, also distinguishing those which can be had in bazars from the rest, and giving native names, weights, and measures.

10. I have thus spared no pains to carry out the design of Government, as communicated to me in your letter No. 3751 of 3rd September 1867. The labor expended on the compilations has not been slight, and I have endeavored to be as accurate and complete as possible.

11. The longer paper might, perhaps, be interesting and useful as a distinct publication in English, besides constituting a record of all that is known on the subject up to date in an accessible form. You will, however, be better able to judge of what ought to be done with them after perusal.

*On the Cattle Plague of Lower Bengal by Kenneth McLeod, A. M. M. D., Assistant Surgeon.
Her Majesty's Indian Army.*

Of late years the attention of the Government of Bengal has been drawn to the losses which are sustained every year by diseases affecting cattle. Hundreds of cattle are yearly swept away throughout the Presidency, and when any of these dreadful visitations appear in a district, the cultivation of the crops is very seriously impeded. This is owing not only to the scarcity of cows which ensues from the great majority having died from disease, nor from the difficulty which a poor ryot who has been deprived of all his cattle finds in buying others to take their place, (and this he can only do by obtaining loans from Mahajuns, sometimes at an exorbitant rate of interest,) but also to the rise in the price of cattle which in some places amounts to ten times as much as it was before the plague appeared. Magistrates of Districts have reported this state of matters, and it is well known that after a season of severe cattle disease the crops of next year are deficient. This causes much suffering and hunger. It is therefore a matter of the utmost importance to the inhabitants of the Presidency, the majority of whom depend so entirely on the state of the crops from year to year, and a matter of great concern to Government, whose interest is theirs, to endeavor to ascertain, as far as possible, the causes of this disease and mortality among cattle, and the conditions on which its appearance and spread depend, in order that these causes and conditions may be obviated; the symptoms of the diseases, in order that they may be recognized and properly treated; and the modes of treatment that have been found most successful, in order that when the diseases do appear as great a number of cattle may be saved as possible. It is with these ends in view that the following pamphlet, containing in short all that is known upon the subject, has been, at the request of Government, compiled for circulation.

I. History of Cattle Diseases in Bengal.—It is difficult to fix the time when these diseases first made their appearance in the Presidency. There are records of severe cattle disease having prevailed in 1817 (B. C. 1222), in 1824, (B. C. 1229), 1836, (B. C. 1241), and 1853 (B. C. 1258). In some Districts they are known to have prevailed from the earliest recollection, and in others persons writing in 1864, (B. C. 1269) state that they have prevailed for 20 or 30 years previously. The attention of the Government of Bengal was drawn to the subject in 1863 (B. C. 1268) by the Government of Madras, in which Presidency severe cattle disease had prevailed. Reports were called for from Commissioners, who received numerous letters from Magistrates. These contain the information derived from Deputy Magistrates, Civil Surgeons, Zemindars, European and Native, and Goallas, and the substance of the information so collected was published in the *Calcutta Gazette* of 12th March 1864. In January 1864 (Magh 1269) a very severe and fatal outbreak of cattle disease appeared on the occasion of the Exhibition at Alipore. This further arrested the attention of Government, who commissioned Dr. Palmer to investigate the subject. This gentleman presented a very full and interesting report in March 1865, (Chait 1870) which was circulated to Commissioners, Magistrates, and Medical Officers, with a request for further information. The request was amply responded to, and during 1866 (B. C. 1271) a great number of highly interesting reports were forwarded from all parts of Bengal. The whole of the information thus obtained will be concisely and methodically set forth in the following pages. All diseases of cattle will not be discussed. Attention will be directed to those only which, like cholera and fevers among men, break out amongst cattle, and carrying away large numbers, attack first one place and then proceed to another, rage virulently for a time and then die out. These diseases are called epizootic diseases.

II. The varieties of these diseases and the names by which they are known.—It would be a highly important matter if the same diseases had the same names in the different districts of the Presidency. This is not the case, and it is difficult, from the imperfect descriptions given by those not skilled in diseases of cattle, to know sometimes what disease in one district corresponds to what disease in another district, when the names are not the same. An exact description of a disease under the name by which it is known in most districts ought to remove this difficulty, and it is hoped that there will henceforth be no difficulty in recognizing the diseases treated of in this paper under their most common names.

The cattle diseases which affect numbers of animals simultaneously in Bengal are of two classes:—

A.—In one there is an eruption observed on some portion of the skin; and

B.—In the other there is no such eruption to be seen.

1. In the former class we find a very common disease affecting the hoofs and mouth of cows, and though not very deadly, attacking great numbers of animals, laming and temporarily disabling them. This disease is called in different places *Khorak*, *Khoraha*, *Khoorea*, *Zairkhara*, *Kkurpakka*, *Khoratileh*, *Khoratie* and *Homsa*. Its existence has been reported from the districts of Shahabad, Turboot, Rajshahye, 24-Pergunnahs, Jessore, Cuttack, Hazareebagh, Loharduggah, Midnapoor, and Backergunge; but it is probable that it is known every where throughout the Presidency, and may have other names than those above enumerated. I shall in the sequel always call it *Khorak*.

2. There is another disease with an eruption appearing upon the body accompanied with more severe sickness, and in every way more serious and fatal, which, from its resemblance to the small-pox of man, is called *Gootee*, *Boshonto*, *Mata*, *Chechack*, *Sitala*, *Mardrishti*, *Tukrooki*, and *Marktee*. This disease is known every where in Bengal under one or more of the foregoing names.

In writing about it I shall always call it *Gootee*.

3. There is another disease without any eruption on the body which, when it breaks out among cattle, is fearfully infectious, rapid, and fatal. This disease is most commonly called *Puschima*, or *Puschima Beg* or *Puschima Nara*. It appears also to be called *Dukaha*, *Hengaha*, *Waghah*, *Dorulin*, *Jor*, *Burrapera*, *Hureena*, *Hurra*, &c., and is known best in the districts of Naddea, 24-Pergunnahs, Jessore, Burdwan, Hooghly and Howrah, and apparently also in Patna, Sarun, Rajshahye, Rungpore, Bograh, Midnapore, Pooree, Newgong, and Darjeeling. I shall always call it *Puschima*. These are the three best known, and most minutely described diseases affecting numbers of cattle. It is from these that by far the greater number of animals which die every year in Bengal are lost. Other diseases are comparatively rare and unimportant. This paper will therefore be confined to a minute consideration of them, and from the exact description of their symptoms, which a study of so many intelligent reports has enabled me to give, other varieties of disease can be separated and studied. In Appendix A. I shall place a short description of the most important diseases of cattle and their treatment, and in Appendix B. I shall enumerate the principal medicines and their doses used in the treatment of all diseases of cows. At present our concern is with *Khorah*, *Gootee*, and *Puschima* only.

III.—*The mode in which these diseases appear and spread in localities.*—The following facts are well ascertained under this head:—

1. During the season when these diseases are apt to prevail, or in the neighbourhood of places in which they do prevail, mild cases are frequently observed.
2. Before the diseases break out with force, a few cases may be seen here and there of a mild description.
3. When the disease breaks out, first one cow and then many cows are affected.
4. The cases which occur at first are more severe and fatal than those which occur towards the end of the outbreak.
5. These diseases appear to prevail principally among herds of cattle, especially if they are crowded together.
6. After the disease disappears from a place, cases of a mild description occur here and there.
7. These diseases visit places after an interval of one to ten years.
8. When they do break out they rage in a place for about three months.
9. During the prevalence of the diseases, while most places and cattle are visited and attacked, some escape.
10. Severe disease is sometimes preceded or succeeded by a milder form of disease.
11. Sometimes the disease is observed to spread in a particular direction, and it has been most frequently noticed to travel eastward.
12. In many cases severe disease among cattle and men have raged together in the same place at the same time.
13. Besides cattle other animals are observed to suffer from similar diseases, buffaloes, sheep, goats, deer, pigs, fowls, pigeons, and ducks.
14. It has been often observed that diseased cows carry the disease to a healthy locality and infect others.
15. A place that has once suffered from any of these diseases, if visited again within a short time, does not suffer so much.
16. The laws of origin and spread of the diseases treated of are similar to those of some human diseases, such as cholera.

IV.—*The causes of these diseases.*—These are of two kinds:—

A.—The causes and conditions that dispose some animals to be affected by them, and more severely than others; and

B.—The causes that immediately give rise to the disease in the body.

A.—Of the first class,

1. *Season of year* holds an important place. From very many statements it appears that while these diseases are apt to occur during the whole year, they are most virulent and fatal in the cold and hot seasons, and less prevalent in the rains. With regard to the particular diseases, *Khorah* seems to be most frequent during and after the rains, *Gootee* in the hot weather, and *Puschima* in the cold months.

2. The state of country, soil, and atmosphere, which seems to give origin to and favor the spread of these diseases, is a moist soil liable to inundation with fresh water, low lying, and level, moist warm atmosphere, and great heat.

3. Cattle fed on coarse grass, old straw, or grazed on pastures which have been recently under water, are more liable to take these diseases and take them more severely than

those which are fed on good straw, chopped and soaked, dry pastures or fine grasses. Dirty water also predisposes to disease.

4. Cows in bad condition are more liable to be affected than those in good condition, unless the disease is very virulent, in which case there appears to be no selection.

5. The age and sex of the cow do not appear to have much effect predisposing to disease or otherwise.

6. Cattle over crowded, kept in damp houses, ill cleaned, over worked, not properly rubbed dry after getting wet or perspiring, and ill fed and watered, are more liable to be attacked than those housed and treated with care.

B.—The exact cause of these diseases has not been as yet found out, but

1. There is every reason to believe that it is a poison, generated under peculiar conditions of soil and atmosphere which enters the animal with the air, food or drink, causes a certain disease, and having been multiplied in the body, is evacuated by and among the discharges. Other animals are apt to be affected by the breath or discharges of a diseased animal, and the air, water, grass, straw or even man, flies, birds, dogs or jackals may carry the poison from one to the other. This is the most probable explanation of the way in which these diseases appear and spread.

2. There can be no doubt of the fact that one animal is capable of imparting these diseases to one or many others, and the way in which this may happen will be understood from the preceding paragraph.

All the medical men who have described the diseases, and many of the Magistrates, Zemindars, &c, consider it infectious in the highest degree.

V.—The symptoms of *Khorah*, *Gootee*, and *Puskhima*.—In all these diseases there is more or less fever, and there are besides certain symptoms of a local kind peculiar to each disease.

1. In *Khorah* there is generally very slight fever, and in most cases the lameness and soreness of the mouth are the only symptoms noticed. The lameness is caused by an eruption between the hoofs, and a similar eruption may be observed inside the mouth. The eruption consists of little bags of watery fluid which rise on the skin. These burst and an ulcer or crust forms. The danger of this disease is, that from want of proper care the ulcers of the foot and mouth may become large, or flies may attack them, maggots form, the legs become swollen and rotten, and the animal die in consequence. The water that comes out of the mouth of animals suffering from this disease is sufficient to give rise to it in others, and the symptoms appear in about two days after the cows have eaten straw which has been soaked in the saliva of diseased animals.

When the disease is severe, the animal refuses food; becomes thirsty, does not chew the cud; has a hot, dry, and rough skin, and a tender udder. The milk is diminished in quantity, the urine becomes high colored, the eyes and mouth water, and diarrhoea may come on. The eruption may also appear on other parts of the body, the udder, neck, &c.

There are then two forms of the disease, one mild with only local symptoms, and another severe with symptoms of constitutional disturbance besides; the disease lasts from ten to fifteen days, and if proper care and correct modes of treatment are adopted, few animals will die.

2. *Gootee* is a much more formidable and fatal disease. In most cases there may be three stages of the disease distinguished.

1st, a period of sickness before the disease breaks out severely;

2nd, a period of fever; and

3rd, a period when eruptions appear on the skin, or the bowels become affected, or both effects ensue.

1st.—During the first period, which lasts two or three days, the cow is observed not to be so lively as usual, to stand apart from the rest and not to feed so heartily. The eye looks dull, the animal generally looks ill, and is either restless or disinclined to move. The milk also diminishes in quantity. The skin looks dry and rough, and sometimes there is a cough. It is extremely important to note these symptoms, because they will at once suggest the propriety of removing the animal from among the healthy.

2nd.—The second stage lasts also two or three days. At its commencement the animal frequently shivers violently, and now the disease begins in earnest. The following symptoms may be observed during the stage:—

1. Increased heat of skin, ears, horns, &c.
2. Roughness of skin, erection of hair and dropping back of ears.
3. Increased rate of pulse and breathing.
4. Complete refusal of food.
5. Absence of rumination.
6. Intense thirst.
7. Inflammation and watering of eyes.
8. Discharge of watery matter from mouth and nostrils.
9. Dry muzzle.
10. Cough occasionally.

11. Swollen tongue.
12. Scanty red urine.
13. General appearance of great distress.
14. Diminished or suspended milk.

3rd.—On the second or third day from the beginning of the second period, the bowels become loose and slimy watery stools, in which blood soon begins to appear are passed frequently.

On the fourth or fifth day eruptions of vesicles succeeded by crusts appear on the whole body or on some part of it. The whole skin, mouth, and hoofs should be carefully examined for these eruptions during this stage; sometimes however they are absent altogether. The hair of the skin close to the eruptions can be rubbed off, and when the eruption is copious, the whole of the hair can be removed. During this period the animal is apt to sink from prostration, the fever leaves, and the skin becomes cold. The discharges become brown or yellow, and begin to smell badly. The feet become cold, ulcers are prone to form in the mouth and skin, the throat may become swollen and ulcerated, the tongue increases in size. The stomach sometimes swells from wind and the animal eventually lies down and dies.

The whole disease lasts about eight days, and if the animal recovers, it takes fifteen or twenty days to do so.

It is a very common and fatal disease, hundreds of cattle are killed by it every year, and when it breaks out in a flock, few cows escape seizure, and of those affected not more than one or two in twenty escape death.

Besides the symptoms described there may be—

1. Severe cough and pain in the chest from inflammation of the lungs.
2. Pain in the stomach from an excess of dry food in it.
3. Swelling of the stomach from wind.
4. Ulcers or maggots on the skin or throat.

3. The symptoms of *Puschima* are very like those of *Gootee*. It is a more severe disease, kills more and sooner. As the stages and symptoms are so similar in both diseases, it will be unnecessary to repeat them in detail, and it will be sufficient to point out the principal points of difference.

1. The fever is not so strong in *Puschima* as in *Gootee*, and it goes and comes, the body being alternately hot and cold. There is also a greater tendency to coldness in the extremities and along the spine of the back than in *Gootee*.

2. The looseness of the bowels comes on sooner; sometimes as early as the second day from the date of the shivering or commencement of the fever, and it is sooner followed by a discharge of blood. The stools are more liquid and fætid than in the last disease.

3. The other discharges begin sooner to lose their clearness in *Puschima*, and the breath smells stronger and sooner than in *Gootee*.

4. The throat is sore in *Puschima*, it is more apt to swell externally than in *Gootee*; the tongue also becomes red and swollen.

5. There is no eruption upon the skin in *Puschima*. Every case of *Gootee*, however, which dies without an eruption, must not be called *Puschima*, because if a cow dies before the fourth or fifth day in *Gootee* there can be no eruption, and many cases which live longer do not exhibit any skin eruption. The character of the disease is to be determined from the general symptoms of the disease as observed in many animals.

6. There are twitchings of the muscles in *Puschima* and none in *Gootee*.

7. The duration of *Puschima* is shorter (average four days) than of *Gootee* (average eight or nine days).

8. This disease is equally infectious with the last and more destructive. A greater number of the cattle attacked die of it (about 90 per cent. of those attacked).

With these reservations the description given of *Gootee* will apply exactly to *Puschima*.

From the preceding account of these diseases it will not be found difficult to distinguish between them.

The eruptions inside the mouth and in the cleft of the hoof, in either or both places, with slight derangement of general health, should distinguish *Khorah* from all other diseases. Severe cases of *Khorah* sometimes resemble slight cases of *Gootee* and the reverse. As far as regards treatment, it is not of great importance to be very accurate in naming such cases, though the general character of the disease in the majority of cases affected will lead to a knowledge of which disease is actually present. *Gootee* is determined by the more severe disturbance of health, higher fever, more severe bowel complaint, and the eruption being general, from *Gootee*. Cases of *Gootee* occur, however, which it is difficult to distinguish from *Puschima*, in which the animal dies of severe constitutional disease without any eruption on the body. Here again the disease should be named rather from the nature of its manifestation in the

majority of cases than from any individual case. A case should not be called Puschima, because there has been no eruption, if most cows affected shew an eruption, nor should an eruption on the body in any case constitute that Gootee, when the outbreak is plainly one of Puschima. In estimating the probability of the issue of the case, the following points should be borne in mind:—

1. In Khorah the absence of constitutional disturbance, and of ulceration and swelling of the foot are good signs, and the existence of disorder of general health, and of ulceration or swelling of the foot are bad signs, and suggest greater caution in treating the case.

2. In Gootee we form an opinion on the extent of the eruption and severity of the constitutional symptoms.

A copious eruption is a good sign.

A slight eruption with severe diarrhoea is a bad sign.

The earlier the diarrhoea and dysentery appear, the worse the discharges smell; the greater tendency the body has to cool; the more unfavorable our opinion of the case, and the reverse.

3. In Puschima our opinion must depend altogether upon the character of the constitutional symptoms.

If the diarrhoea sets in early and is soon followed by dysentery, if the discharges smell badly, if the body has a tendency to grow cold, and the febrile stage is very short, then the probability of the case proving fatal is very strong. If the body retains its warmth, the discharges are not very fetid, and the diarrhoea and dysentery are mild, then the hope of recovery is stronger.

Swelling of the throat or stomach are bad signs, and evident pain in the chest or belly give evidence of some complications which diminishes the chance of recovery.

VI.—*The appearances observed in the internal organs after death.*—When the body of the cow is opened in Gootee and Puschima, the state of the internal organs is found to be very much the same.

1. The blood in both diseases is seen to be black and thick, and in the heart solid lumps are frequently found.

2. The whole of the inside of the mouth, throat, stomach, and intestines, is inflamed and covered with ulcers.

In the stomach is frequently found food hard, dry, and powdered, pressed together in hard plates. This is the cause of death in very many cases.

3. The lungs are sometimes found to be inflamed, and the lining membrane of the windpipe also swollen and red.

4. The spleen and the liver are sometimes found to be swollen and filled with blood.

These are the principal appearances observed. They indicate a very severe form of disease of the febrile kind.

VII.—*The nature of these diseases.*—The symptoms of disease observed during life and the appearances observed after death, leave no doubt that Khorah, Gootee, and Puschima are fevers accompanied with an eruption of the skin or otherwise. They exactly resemble no disease of man but are somewhat like several as small-pox, some fevers and the plague. None of them are the same as the small-pox of man, and they have different symptoms from cholera.

They are in all probability caused by a poison which is derived from the soil in certain states of it, or from other animals suffering from the same disease. This poison enters the body of the animal by the nostrils or mouth, and after a certain time signs of sickness appear. The animal first becomes disordered, then, as the action of the poison becomes more intense, a state of fever arises; then, the system attempting to throw off the poison by the skin or bowels, these become affected with inflammation or actually ulcerated, and from the effects of these processes upon the system exhaustion and death ensue.

According to the strength of the poison, the effects will be more or less severe, and there is some reason to think that these diseases are caused by a poison of the same kind in different degrees of strength.

VIII.—*Treatment.*—Before entering upon the details of treatment, there are a few obvious truths which it would be well always to bear in mind.

1. It is infinitely better and easier, if that is possible, to prevent cattle from having these diseases than to cure them when they have got them.

2. When any of these diseases break out among cattle, a certain proportion of deaths must be expected; our object is by taking advantage of every means in our power to promote recovery to render the loss as slight as possible.

3. Failure of any plan of treatment in one case does not prove that it may not succeed in another.

4. It is only by trying different means of treatment with perseverance and hope, and by comparing them with each other, that we can determine which is best and most successful.

5. The more we know of diseases and of the actions of medicines the better we can cure the former and apply the latter.

6. In order to know and be able to do as much as possible, it is incumbent upon every one to observe the characters of diseases as much as possible and the actions of medicines, and to communicate any new observations or facts to others.

These truths will command general assent.

In order to give the most complete view of the treatment of these cattle diseases, I shall state: *first*, what means ought to be taken to improve the condition of cattle so as to render them as little liable to disease as possible, and better able to stand it if it comes; *second*, if the disease is in the neighbourhood, what means should be adopted to prevent its access to a place; *third*, if it does appear in a place, what means should be taken to prevent its spreading and seizing on all the cattle; and *fourth*, what medicines it is proper to give in each kind of disease to assist recovery.

1st.—What ought to be done to keep cattle healthy and in good condition?

For this purpose the following points demand particular attention:—

(a.) The *breed* of cattle should be improved by getting strong bulls from a different flock and of a good stock, and preventing the bulls of the flock itself from covering; by preventing bulls from covering too young; by feeding calves well, and not beginning to work them too early.

Breeding should be preferred to purchasing cattle, because it diminishes the chance of introducing disease.

b. The *food* of cattle should be carefully studied. The grass which springs up in the early rains is injurious.

Pastures that have been recently inundated are poisonous.

Coarse grasses with thick stems are bad.

Fine dry pastures are most suitable for grazing cattle.

Paddy straw carefully dried and stacked, and meadow hay preserved in the same manner, are the best food for ordinary use; these should be chopped up and moistened.

If the cattle are worked, gram, dhan, oil-cake, or coarse peas should be given in small quantities. Chopped plantain stalks and young leaves are nutritious when nothing else can be got.

(c.) The *houses* of cattle should be made a matter of care.

They should be large enough. It is the worst thing possible for cattle to crowd too many in the same house.

The floor should be dry and raised above the ground with dry earth, sand or bamboos; they should slope to the outside to allow fluid to run off.

The roof should not admit rain, and openings should be left in the walls for ventilation.

The floors of cattle sheds should never be wet or muddy.

(d.) The *water* which cattle drink should be clean. Old tank and wheel water is poisonous. Water for cows should be drawn from rivers or clean tanks.

(e.) *Cleanliness* should be carefully attended to. Dung should be removed daily and heaped at some distance from the cow house. Dry clean straw should be given for a bed every night.

(f.) In *working* cattle care should be taken not to over work them; not to work them too long without food; four hours at a time is enough: to rub their skins dry with straw if they get wet or perspire, and to proportion the work to the age and constitution of the animal.

The value of cattle to the Zemindars and Ryots of this country is well known, and if they are worth having, they are certainly worth being taken care of, especially as neglect of any of the points above enumerated renders them more liable to catch disease and less capable of resisting it when it comes.

2nd.—When cattle disease is in the neighbourhood.

(a.) The greatest care should be taken to prevent infection by keeping cattle away from public roads and routes of travel, and refraining from buying and selling.

(b.) The housing, cleanliness, food and drink of cattle should at such times be more particularly attended to.

(c.) All communication of every sort with infected places should be suspended.

(d.) Hospitals (kutchas) should be constructed in secluded places in case of their being required.

3rd.—When the disease actually appears.

(a.) All the sick cattle should be placed apart from the rest in kutchas hospitals, and the straw, &c., which they came in contact with should be burnt.

(b.) The healthy cattle should at once be removed to places several miles away where no disease is known to exist.

(c.) If disease follows them there, then the sick and healthy should be again separated and the latter removed again; this should be repeated till the disease disappears; large herds should be split up into smaller sections.

(d.) All straw, bamboos, grass, &c., in contact with sick cattle should be burnt, and their dung carefully buried or burnt with the straw.

(e.) All carcasses of cattle should be carefully buried at least three feet (two hats) below the surface.

- (f.) The hides should never be removed from the carcasses but buried with them.
 (g.) When a cow recovers, it should be washed carefully with soap and water.
 (h.) Sick cattle should never be permitted to remain on a pasture, as their saliva and dung is poisonous.

(i.) Before the healthy are brought back to a village, from which by these means the disease has disappeared, everything that has been in contact with the sick should be burnt, and some time should elapse before the cattle are brought in.

These rules are based upon experience, and many instances are reported where the adoption of these rules saved many cattle from infection. The carrying out of them involves some trouble, but what is that in comparison with the value of the stock saved?

There is no other method of preventing the spread of these diseases, and when experience has proved the value and efficacy of these directions, they should be adopted without hesitation.

On this point there is no need for further trial or experiment.

The advantages of the plans recommended have been proved over and over again.

4th.—It now remains to point out what method of treatment is suitable in the different diseases already treated of.

A.—In *Khorah* the eruptions and ulcers demand the attention more than the general disease.

(a.) The most common method adopted in this country is to keep cows standing in water or salt mud; this prevents the flies from attacking the sores, and cures the great majority of cases. It must be done thoroughly and continuously, if done at all. The eruptions and sores should at the same time be washed with a lotion which may consist of—

Alum (Phitkerie)	...	...	½ chittack.
Water	...	...	1 seer.
Or Borax (Sohaga)	...	...	1 chittack.
Water	...	...	1 seer.
Or Salt (Lobun)	...	...	2 chittacks.
Water	...	...	1 seer.

(b.) If the water or mud method is not convenient, the feet should be carefully washed and tar (alkatra), knrunj oil, campher (kaloor), and linseed oil (moshiner tel), as much, campher as will dissolve in the oil with the aid of heat, or sulphate of copper (tootea) and treacle (khan) (Appendix C. No. 72) should be applied to the eruption or ulcer with a bit of cloth tied to the end of a stick.

(c.) A slight purge should be given—

Epsom salts (sats)	...	...	4 chittacks.
Salt (lobun)	...	...	4 "
Powdered Ginger (soot)	...	...	1 "
Water (jol)	...	...	1 seer.

(d.) If there are febrile symptoms, watering of nose and eyes, heat, &c., the following can be administered :—

Black antimony (soorma)	...	...	½ tolah.
Black salt (karee lobun)	...	...	1 "
Nitre (shora)	...	...	½ "
Sulphur (gundruck)	...	...	2 "

To be given in one seer of rice water, or boessie and water, twice a day.

(e.) If the ulcers are large, alum (phitkerie) should be dried and powdered and sprinkled on them, and they should subsequently be washed with indigo water (nil jol), or neem water (neem jol), or sulphate of copper, or alum water.

If the ulcers become unhealthy they should be burnt with arsenic (shenko beesh), corrosive sublimate (roshkopoor), either alone or mixed with other as much flour (soojee), or nitric acid (shora er drapoe), or nitrate of silver (kastie), or sulphate of copper (tootea), and then treated with anna and water or any of the lotions above given.

(f.) If through carelessness maggots (kirmi) form, they should be carefully extracted, the swelling should be poulticed with boessie and powdered charcoal (koela) and campher (kaloor) and oil of turpentine (tarpentel) and oil frequently applied.

If these directions are carefully attended to few cattle will be lost from *Khorah*.

B.—In *Gootee* the constitutional disease is of more importance than the local eruption.

(a.) One gentleman (Mr. Fiddington) has strongly recommended the following plan of treatment for curing the sick and preventing the healthy from taking the disease.

The sick and healthy cattle are locked up in separate houses with all the doors closed; a plateful of common salt is placed on the floor and half a chittack of strong sulphuric acid (gundruck or drapoe) and poured on it. Very irritating fumes arise. The person pouring on the acid must go out of the house at once and not breathe this white smoke; the windows and doors are kept shut for eight or ten minutes and then opened; the white smoke causes the cattle to

cough, but is said to cure them. This should be repeated morning and night for a few days (three or four). If these means can't be adopted, the smoke of green wood is a good substitute, but when they can be adopted, they should certainly be tried.

(b.) Another plan is strongly recommended by Captain Chambers, namely, the administration of half a chittack of black salt (karee lobun) to the sick twice a day, and one-fourth chittack twice a day to the healthy. This may be tried, but the other precautionary measures detailed under the second and third sections should not be neglected.

(c.) Another gentleman (Dr. Jackson) found the application of croton seeds (joipal er beesh) in the form of an ointment to the side so as to excite profuse suppuration, cure the only four cattle in which he tried the plan.

Both these methods may be tried.

(d.) In the febrile stage a purge should be given.—

Common salt (lobun)	...	...	½ to 1 seer.
Rice water or boossie and water	...	...	2 seers.
Or Epsom salts (sats)	...	...	4 chittacks.
Sulphur (gundruck)	...	...	2 "
Ginger (soot) . . .	...	...	½ chittack.
In one seer of rice water, &c.			
Or Linseed oil (moshiner tel)	...	...	½ seer.
Oil of turpentine (Tarpen tel)	...	...	1 chittack.
Croton oil (joipal er tel)	...	...	10 phuttas.
Given slowly.			
Or Aloes (mosubber)	...	...	½ chittack.
Soda (sugce muttee)	...	...	½ "
Boiling water	...	...	1 seer.

Any of these may be given in order to produce a copious stool which assists in carrying off the poison.

The following should be occasionally administered —

Black antimony (foorma)	...	...	½ tolah.
Sulphur (gundruck)	...	...	½ chittack.
Nitric (shora) ...	...	...	½ "
Black salt (karee lobun)	...	...	½ "

In beer, rice water, &c., one seer twice a day.

(e.) In the third or eruptive stage, the bowels should be treated with soothing and slightly astringent medicines.

Camphor (kafoor)	...	...	½ chittack.
Cannabis (bhang)	...	...	2 chittacks.
Catechu (choyre)	...	...	½ tolah.
In rice water, gum water, &c.	...	...	1 seer.
Chalk (karee muttee)	...	...	1 tolah.
Or Galls (majuphal)	...	...	1 "
Opium (afcem)	...	...	15 ruttees.
In rice water, gum water, &c.	...	...	1 seer.
Camphor (kafoor)	...	...	½ tolah.
Or Cheretta (cheretta)	...	...	½ tolah.
Ginger (soot) ...	...	...	2 tolahs.
Bhang	...	...	2 "
In rice water, gum water, &c.,	...	...	1 seer.

Any of these or similar prescriptions can be given every four or six hours. A decoction of hael fruit or indurjub can be also occasionally administered.

In this stage the body should be washed with warm vinegar (sirka) and water (one chittack to one seer).

(f.) If the throat swells it should be blistered externally with a hot iron, liquor ammoniac.

Or croton seeds (joipal el beesh)	...	...	½ chittack.
Oil of turpentine (tarpan tel)	...	...	4 chittacks.

let stand for a fortnight, pour off the clear fluid, and rub to the skin after mixing with an equal quantity of cocoanut oil.

Or croton oil (joipal el tel)	...	...	½ chittack.
Oil of turpentine (tarpan tel)	...	...	4 chittacks.

this may be used at once.

(g.) If there is pain in the chest or cough the blister should be applied to the chest.

(A.) If the stomach swells or there is evident pain in it the blister should be applied, then linseed oil and turpentine according to the prescription given should be slowly administered by mouth and assafoetida (hing) capsicum (loncha mirah) carraway (jeera) with opium (afeem) or bhang administered after the bowels are moved.

(i.) During the whole of the course of the disease the strength of the animal should be sustained by means of frequent drenches of rice and water, boossie and water, suttoo and water, arrowroot and water, or similar food. The thirst of the animal impels it to take too much drink in the second stage; this should be prevented. If ale or beer can be procured, a bottle may be given twice a day.

It is in managing the diet and sustaining the strength of the animal that the secret of successful treatment consists.

One of the first signs of recovery is a return of appetite, and soft, well washed grass should be given in small quantities, when any indication of this appears. Care should be taken to keep the animal warm if the hair falls off and to prevent its eating too much food during recovery.

(C.) Having gone so minutely into the treatment of Gootes little remains, to be said of Puschima. The same means of treatment should be employed.

The more severe character of the disease and the greater tendency to sink should be borne in mind, and nourishing drinks should be steadily given and stimulants ammonia, ether, capsicum, beer, &c., with camphor or opium frequently administered. In this as in the former disease all drinks and drenches should be liberally *salted* with common salt (lobun) or salt-peter (shora) or black salt (karee lobun).

Appendix A. will be found to contain a short description of the most common diseases of cattle, their nature, symptoms, and treatment.

Appendix B. contains a list of the most common cow medicines, their action, use, and dose.

Appendix C. gives a list of useful prescriptions under different headings; and

Appendix D. shows a comparison of English medicine weights with Bengalee weights and measures.

APPENDIX A.

Tabular description of the principal Diseases of Cattle not treated of in the preceding paper.

NAMES OF DISEASE.		Nature.	Symptoms.	Treatment.
English.	Bengalee.			
I.—Diseases affecting the organs of Respiration.				
1 Catarrh ...	Surdi ...	Inflammation of the lining membrane of the nose.	Shivering; discharge from nostrils, cough, fever, constipation.	Soft or liquid food, slight purge, and small doses of nitre.
2 Bronchitis ...	Utkas ...	Inflammation of the wind-pipe and its branches.	Quick breathing, fever, wheeze or grunt; discharge of clear or mucous fluid from nose, cough, loss of appetite.	Avoidance of cold. Blisters to wind-pipe, slight purge, expectorants.
3 Phthisis ...	Jokkas or Kyakas ...	Formation of tubercles in the lungs.	Cough, difficult breathing, wasting, sometimes diarrhoea.	Tonica, generous diet, blisters to chest.
4 Hoose ...	Kirmi upo nulli or bethur.	The existence of parasites in the air tubes.	Severe cough, as if the animal was trying to get something up; rapid wasting; loss of appetite and difficult breathing.	Linseed oil and turpentine. The vapor of chlorine gas or tobacco.
5 Pneumonia ...	Phush Phush Pirdaho.	Inflammation of the lung.	Shivering, quick breathing, fever, cough, pain in the side, cow lies down, grunting or grunting, thirst and loss of appetite.	Tonica.
6 Pleuro Pneumonia.	Same name ...	Inflammation of the lungs and the membranes covering them.	Severe cough, difficult and rapid breathing; fever, pain in the chest; loss of appetite and thirst; failing in milk, grunting or grunting; constipation; swelling of stomach, rapid prostration, diarrhoea at the last.	<i>Blisters to chest.</i> Slight purge, diuretics, Tonics. Nutritive liquid food.

II.—Diseases of the organs of Digestion.

1 Choking ...	Bendejas ...	Stoppage and stuffing of food in its passage down the throat.	Coughing, thrusting forward the head, discharge of spittle from mouth, difficulty of breathing and moaning.	Extraction of the morsel if possible by the hand. Pushing it on by a bit of cane with a ball at the end, or cutting it out.
2 Tympanitis ...	Pot Phappa ...	Distention of the stomach with wind.	Swelling of stomach; hollow sound when struck; intense pain, restlessness, striking stomach with foot, difficulty of breathing.	Oil, mustard, ammonia, linseed oil and castor oil, carminatives, ginger, caraway, &c.
3 Gravelic ...	Pot bhara ...	Over-distention of the stomach with food.	Swelling of stomach which is soft, want of appetite, dullness, absence of rumination, constipation. Slight difficulty of breathing.	Puncturing stomach or passing a tube down the throat.
4 Inflammation of rumen.	Pot er Pirdaho	Inflammation of the first stomach consequent on the former disease.	Pain of the side increased by pressure, quick breathing, fever.	Purge with stimulant followed by linseed oil, rubbing stomach.
5 Vomiting ...	Vomi ...	Discharge of the contents of the stomach by mouth.	Instead of chewing the cud and swallowing it again the animal rejects it entirely.	Cutting into the stomach on the left side and removing its contents by hand.
6 Foodbound	None	Packing of hard dry food in the third stomach.	Loss of appetite, absence of rumination, quick breathing, grunting, constipation, dung dry or glazed or diarrhoea; if not relieved inflammation and fever.	Oily purges and soft food.
7 Gastroenteritis "White scour."	Ontor er Pirdaho.	Inflammation of the stomach and intestines in young calves.	At first there is constipation, then a frequent discharge of white fluid stools.	Purge of salts, aloes, and ginger or linseed oil, and turpentine repeated at intervals. Blister externally, soft food.
8 Diarrhoea ...	Grini, Am or beran ...	Disease of the membrane of the intestines.	Excessive and frequent discharge of liquid stools, loss of milk, absence of rumination.	Cokumel and opium if inflammation occur.
Chronic Diarrhoea.	Ditto	Dependent upon disease of the glands of the intestine.	Frequent loose stools and gradual emaciation.	A mild purge accompanied by a stimulant followed by astringents.
10 Dysentery ...	Roctamasahoi ...	Ulceration of the membrane of the large intestine.	Frequent discharge of fluid stools mixed with blood, pain, straining, and prostration.	Stimulants and astringents, tonics, soft nutritious food.
11 Colic ...	Shal ...	Spasms of the intestines.	Cow gets up and lies down, strikes belly with legs, severe pain going and coming.	Mild oily purge with an anodyne followed by tonic astringents.
12 Intussusception.	None	Pushing of one portion of an intestine into another.	Continuous pain in stomach, great prostration, kicking of belly, switching of tail, constant discharge of small bits of dung.	Purge with ammonia and opium.

Opium and nuxvomica.
An operation in some cases.

NAME OF DISEASE.		Nature.	Symptoms.	Treatment.
English.	Bengalee.			
13 Enteritis ...	Outor or Pirdabo	Inflammation of the small intestine.	Continuous pain in belly, quick breathing, trembling of the body.	Opium or bhang, linseed oil and gruel, liquid food.
14 Dropsy ...	Johiduri	Accumulation of water in the sac of the belly.	Gradual enlargement of the belly, no pain, sound of water when struck.	Tapping on right side, low down, diuretics and tonics.
15 Thrush ...	Gulergah	Ulcers of the mouth	Slight fever, discharge from mouth, eruption or ulcers on the inside of the mouth.	Slight purge, application of alum or borax to mouth.
16 Glossitis "Blain."	Rominer Pirdabo	Inflammation of the tongue.	Swelling and protrusion of tongue; difficulty of swallowing; fever, hardening, abscess or mortification may ensue.	Scorifying the tongue with a lancet. Gentle saline purge, application of astringents locally.

III.—Diseases of the Organs of Generation.

1 Abortion ...	Gorbopat	Premature birth of calf.	The contents of the womb are expelled before the proper time.	Avoid overworking or over driving cattle with calf. Attention to diet.
2 Retention of the Placenta	Phul bazar hujama.	The after-birth is not discharged with the calf.	If the placenta becomes decomposed, fever sets in.	Stimulant purgative, ergot of rye.
3 Eversion of the bladder.	None	The bladder is turned inside out and protrudes.	A red tumor appears in the vagina, and urine constantly dribbles away.	Nitro if fever comes on. The bladder should be pushed back by hand early.
4 Eversion of the vagina.	None	The vagina is turned inside out and protrudes.	An internal tumor of the private parts generally occurs before parturition.	Replace by hand. Apply cold and astringents and feed well.
5 Eversion of the uterus.	Gorbashoi niti Jawa.	The womb is turned inside out and protrudes.	A larger tumor than in the last case protruding from the private parts.	Wash with warm water, replace and retain the organ by a truss in its place.
6 Dropsy of the uterus.	Gorbashoi or Johiduri.	An accumulation of fluid in the womb.	Enlargement similar to pregnancy, but the cow goes beyond her time.	Evacuate the fluid through the vagina by dilating the mouth of the womb with the finger.
7 Puerperal apoplexy.	Shongsur	Congestion of the brain.	The cow becomes restless after calving, falls and rises again, becomes weaker, and finally, lies down and becomes senseless.	Bleeding in the early stage. A smart purge, alcoholic stimulants, blisters to spine.
8 Mammitis ...	Ston or Pirdabo	Inflammation of the udder.	Heat of the udder, hardness and redness, difficulty in walking, fever, milk changed in quality, abscess or gangrene may ensue.	Bleeding. Poultices. Nitro and antimony. Iodine ointment if the hardness becomes chronic.
9 Obstruction of the teats.	Dudh band hai.	Milk stones, stricture of the milk passages or warts.	The flow of milk is impeded.	Removal of stones, dilatation of stricture, incision of warts.
10 Gonorrhoea ...	Dhat or beran.	Inflammation of the tube of the penis or of the vagina.	Pain in making water, discharge of matter from penis or vagina, ulcers or mortification may ensue.	Gentle purge. Iodo and nitro. Injection of sulphates of zinc or copper, nitrate of silver, &c., Copahu and carbonate of potash. Cubebæ. Solid nitrate of silver to ulcer.

IV.—Diseases of the Circulatory system.

1 Disease of the heart.	Ontokurn or Borom.	Inflammation of the heart or its covering. Foreign bodies in the cavity. Widening or narrowing of the valves, &c.	Quick breathing and rapid or intermittent pulse, pain over heart, want of appetite, debility, failure of milk, wasting. (Edema, fulness of veins.	Purgatives occasionally repeated; bleeding if obstruction digitalis and belladonna with nitro.
2 Inflammatory fever "Black Leg."	Bikar, Sonnipat	Fever with swelling of one of the legs affecting young animals.	Dulness, lameness (sudden), puffy, swelling of the leg which crackles, rapid sinking.	Bleeding in the earliest stage; strong purge, diuretics and tonics, incisions, attention to diet.
3 "Rindappest."	Puschima	A febrile disease of an infectious nature affecting large numbers of cattle.	The symptoms are the same as those of "Puschima," which we see.	Early separation of affected from healthy, and removal of healthy from the locality. Medical treatment the same as for Puschima.

V.—Diseases of the Abdominal Viscera.

1 Jaundice ...	Naha	Obstruction to the flow of bile by gall stones or disease of the liver.	Skin and membranes of the eye and mouth yellow, want of energy, constipation. Urine whitish in color, urine deep brown. Pain and fever in some cases.	Purge of aloes and salt. Gentian and nitro. If the liver is inflamed.
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NAMES OF DISEASES.		Nature.	Symptoms.	Treatment.
English.	Bengalee.			
1 Cystitis ...	Muttashoi Pirdaho.	Inflammation of the bladder.	Pains in the stomach near the back part, fever.	Draw off water. Throw a bland injection into the bladder. Administer a purge and give calomel and opium.
2 Nephritis ...	Mutroprints Pirdaho.	Inflammation of the kidney.	Fever, pain in the loins, increased on pressure, arched back, difficulty and pain in walking and constant attempts to make water without much effect, urine becomes thick and latterly bloody.	Bleeding. Purging. Calomel and opium. Blister to loins. Soft or liquid food.
3 Hematuria or red water.	Roctodhat	A discharge of blood from the bladder.	Blood comes away with the urine.	Cold applications, Epsom salts, sulphuric acid.
4 Calculus in the bladder.	Mutroshoi Pat-lori.	A stony substance in the bladder.	Pain and irritation in making water, sometimes sudden stoppage, occasionally discharge of blood.	Acetate of lead, soft food. Excision is difficult and dangerous and the animal should be killed for food, if circumstances accord.
5 Red water ...	Lallpeshab	The urine is colored with the coloring matter of the blood. Attacks numbers of cattle.	Diarrhea for two or three days followed by constipation; urine first brown then red, then black. Quick pulse, want of appetite, loss of milk which becomes brown, emaciation.	Slight purge. Turpentine and nitric ether. Iron and Cinnamon.
7 Splenic apoplexy.	Fildi	Enlargement of the spleen with blood.	Arched back, difficult of walking, staggering, twitching of muscles, paralysis. Salivation, difficult breathing, quick pulse. Pain, griping, diarrhea, and blood colored motions, bloody urine, convulsions, fatal in twenty-four hours. 98 per cent of cases die.	Bleeding, followed by tonics and stimulants. Attention to diet.

VI.—Diseases of the Brain and Spinal Cord.

1 Coma ...	Mourcha	A state of stupor caused by a variety of structural and functional diseases of the brain.	Dulness gradually increasing, staggering or falling finally, complete unconsciousness.	Stimulants and purgatives in cases depending on functional causes and poisons.
2 Paralysis ...	Pukkoachai	Impairment of power of motion caused by disease of the brain or spinal cord.	According to the seat of disease the animal loses the power of all its limbs, the limbs of one side or the hind limbs.	If depending on a functional cause strong purgatives and stimulants, followed by Bar-Vomica. Blisters to spine.
3 Perimeningitis ...	Mutshikho or Pirdaho, Pirlap.	Inflammation of the brain.	Stupor followed by delirium of a furious character, wild appearance, sometimes paralysis.	Bleeding. Purge of Epsom Salts and Croton-oil, timbers of acouite, means to prevent injury.
4 Tetanus ...	Toukas	A spasmodic nervous affection.	Stiffness of gait, stretching of neck, locked jaws, anxious look, spasms increase in violence and come in paroxysms, bowels constipated.	Quiet. Strong purge, sedatives. Stimulants to spine.
5 Apoplexy ...	Shangnar	Sudden unconsciousness from congestion of the brain or effusion of blood into it.	Endless falling, insensibility, and difficult breathing.	Bleeding from jugular, purge. Tincture of acouite.
6 Hydrocephalus.	Sit or Jel	Water between the covering membranes of the brain in young animals.	Enlargement of the head. Gradual wasting and stupor.	Treatment of no avail.
7 Ophthalmia.	Chouk, Utta	Inflammation of the eye ball.	Redness, watering, and swelling of the eye, pain, and difficulty of vision.	Remove dust, &c., if present. Give a slight purge and apply emollient and astringent washes.

VII.—Diseases of the Skin.

1 Hide bound...	Sukka Chakra	Absence of the fatty secretion of the glands of the skin.	The skin has a dry harsh feel, there is generally some constitutional disease.	Removal of the constitutional disease, slight purgative doses.
2 Mange ...	.....	An eruption caused by a small insect burrowing into the skin.	Itching, loss of hair in spots, scabs or pimples, wrinkling or folding of the hide.	Sulphur ointment, tar and turpentine ointment, lotion of Trichloride of Mercury.
3 Lice ...	Kirmi	Parasites among the hair	Swarm of the animals are found on the coat which is thin and poor.	Stavesacre and white Hellebore lotion, strong tobacco decoction.
4 Warts ...	.....	Tumor of the skin containing the eggs of a fly.	A small abscess forms and the young flies escape.	The disease is of no consequence.

NAMES OF DISEASES.		Nature.	Symptoms.	Treatment.
English.	Bengalee.			
5 Ringworm ...	Idoul ...	An eruption caused by a vegetable growth, situated generally on the head and neck.	Round patches, scaly, and when peeled raw, discharging a yellow matter, loss of hair, rings form and grow larger, animal in bad condition.	Attention to diet, generous food, sulphur and antimony, iodine or nitrate of silver externally.
6 Warts ...	Amcel ...	Growths of and on the skin.	A round ragged horny growth.	Excision or caustic.
7 Cow-pox ...	Gora Boshunto.	An eruptive fever, human small-pox in cattle.	Red patches on the udder followed by small bumps, which contain a clear and then a yellow fluid; these become crusts; little or no fever.	Mild purging, warmth, and careful dieting.

VIII.—External injuries, &c.,

1 Wound ...	Jukm, Aghath ...	Divisions of soft parts, simple, lacerated, contused or punctured.	Bleeding slight or severe according to the severity of the injury.	Bleeding to be stopped by pressure, cold or ligature; wound to be stitched; cold water dressings, warm fomentations to lacerated or contused wounds.
2 Fractures ...	Ostibhango ...	Breaking of bones with or without external wound.	Shortening of limbs, deformity. Crackling sound from rubbing of the ends of the broken bones.	Cold applications, leather splints if the site of fracture admit.
3 Inflamed vein	Shira pirdaho ...	Inflammation of a vein in consequence of bleeding.	Swelling, redness, and discharge from a wounded vein.	Fomentations, withdrawal of pin.
4 Opened joint	Grinti or Jukm	Penetrating wound of a joint.	Discharge of fluid from the wound of a joint.	Hot iron to be applied to orifice followed by abrad.
5 Foul in the foot,	Faw or Gs ...	Ulceration of the cleft of the hoof from the presence of foreign bodies.	Lameness, unhealthy discharge from the part, fever, swelling of foot.	Remove foreign bodies, clean thoroughly, apply astringent washes, caustics if necessary.
6 Sprain ...	Moska ...	Rupture of a tendon from violence.	Lameness, pain, heat and swelling of part.	Rest, cold application, stimulant liniments when inflammation subsides.
7 Rheumatism..	Bat ...	A constitutional disease with local swellings.	Fever, lameness, pain and swelling of one joint and then another.	Purge, nitre. Aconite, if pain severe.
8 Hernia ...	Outerbiddi ...	Protrusion of the intestines through a weak part of the abdominal walls.	An external swelling of the belly capable of being replaced into the cavity of the abdomen.	In some cases this condition can be remedied by operation.

APPENDIX B.

List of Medicines used in the treatment of diseases of Cattle, their actions, use and doses. Medicines procurable in Bazaars distinguished by an asterisk.

NAMES OF DRUGS.		Action.	Use.	Dose.	Reference to prescriptions.
English:	Dengalee.				
* Acacia	... Babbaratta	Nutritious and soothing (IX)	To soothe inflamed and irritated membranes.	To any amount	49, 80.
* Acetum	... Sirka	Astringent internally (V.) Stimulant externally (XV.)	To wash sore or foul surfaces	1 chittack to 1 seer of warm water.	70.
* Aconite	... Katbeesh, Meeta beesh	Sedative and anodyne (II.) ...	In fevers and inflammations	10 to 20 phittas of the tincture, (orisht.)	9, 10, 59, 61.
* Adeps	... Churbi	(XVI)	To make ointments	Not used alone	71.
Ether Sulphuric	...	Stimulant (XVII)	In diseases of debility	1 to 1 chittack	74.
Ether Nitric	...	Stimulant and diuretic (XI)	In all febrile complaints	Ditto	6, 18, 51, 53, 58, 59, 75.
* Alcohol	... Sharab	Stimulant (XVII.)	In debility and prostration ...	According to quality used	7, 67, 57, 68, 85.
* Aloes	... Mesubber	Aperient (IV.), alterative (I.)	To open bowels, to improve condition.	1 to 3 tolahs	8, 16, 23, 24, 67.
* Alum	... Phickarie	Astringent (V.) (XV.)	To check discharges and improve ulcers.	1 to 1 chittack.	
* Aromatic Spirit of Ammonia.	... ..	Stimulant (XVII.)	In debility and prostration ...	Ditto	16, 20, 40, 75.
Water of ammonia	... ..	Ditto	Ditto	Ditto	34, 36, 57.
Carbonate of ammonia	... ..	Ditto	Ditto	1 1/4 to 2 1/4 tolahs	41, 83.
* Black antimony	... Soorma	Febrifuge XIV. Alternative (I.)	In all fevers	1 to 1 tolah	1, 52.
Tartar Emetic	... ..	Febrifuge (XIV) Emetic (XII.)	Ditto	1 to 1 tolah	37, 62.
* Arsenic	... Shemel khar, Shenko-beesa.	Caustic (VIII.)	To remove warts, &c.	Not used internally	46.
* Aesulfetida	... Hing	Stimulant and carminative VI.	In flatulent swelling	1 to 1 tolah	18, 14.
* Barley	... Jaub	Demulcent IX.	As a vehicle for medicines and soothing drink.	To any amount.	

Names of Drugs.		English.	Bengalee.	Action.	Use.	Dose.	Reference to prescription.
* Bael	...	Bél	...	Astringent (V.)	To check excessive discharges	1 to 2 chittacks.	10, 11.
* Belledonna	...	...	...	Anodyne (II.)	In spasmodic diseases	$\frac{1}{4}$ to 1 tola of the extract	
* Borax	...	Sahaga	...	Astringent (V.)	To inflamed or ulcerated surfaces.	$\frac{1}{4}$ to 1 tola.	
Calomel	...	Para	...	Apertient (IV.)	To open the bowels	$\frac{1}{4}$ tola	17.
Mercury and chalk	...	Para Karle Muttee	...	Apertient (IV.)	Ditto	$\frac{1}{4}$ to 1 tola	2.
* Camphor	...	Kufoor	...	Febrifuge XIV.	In low stages of fevers	1 to $1\frac{1}{4}$ chittack	5, 63, 74.
* Cannabis	...	Gunga, Churru, Bhang	...	Anodyne (II.)	In painful and irritating diseases.	$\frac{1}{4}$ to 1 chittack	13.
Cantharis	...	...	...	Blister (VI.)	As a counter-irritant	Not given internally	23.
* Capsicum	...	Lenka mirich	...	Stimulant (XVII.)	In low fevers and colic flatulent distension.	$\frac{1}{4}$ to $\frac{1}{2}$ tola	14.
* Carbon	...	Koela aungar	...	Corrects putrefaction	As a poultice to mortifications	Not given internally.	
* Carraway	...	Jeera	...	Stimulant, carminative (VII.)	In flatulent distension	1 to $1\frac{1}{4}$ chittack	13, 32, 42, 52.
* Catechu	...	Khoyre	...	Astringent (V.)	To check discharges	$\frac{1}{4}$ to 1 tola	39, 32, 33.
* Chalk	...	Kare Muttee	...	Ditto	Ditto	$\frac{1}{4}$ to $1\frac{1}{4}$ tola	27, 28, 29, 32, 83.
* Chiretta	...	Chiretta	...	Tonic (XIX.)	In debility and emaciation	Ditto	27, 28, 29, 42, 52.
* Sulphate of copper	...	Tooteea	...	Astringent (V.)	To check discharges, to improve the state of wounds.	$\frac{1}{4}$ to 1 tola.	65, 72, 77, 83.
* Acetate of copper	...	Zungul Zangar	...	Caustic (VII.)	An application to foul wounds	Not used internally	73.
* Croton	...	Joolpal	...	Apertient (IV.)	To open the bowels externally, to produce suppuration.	10 to 20 ruttees	24, 25, 55.
* Cubebs	...	Kabab cheence	...	Tonic (XIX.)	In Gonorrhoea	1 to $1\frac{1}{4}$ chittack.	
Balsam of Copaiba	...	...	...	Demulcent (IX.)	Ditto	$\frac{1}{4}$ to 1 chittack.	
* Digitalis	...	...	...	Febrifuge (XIV.)	In fevers and diseases of the heart.	$\frac{1}{4}$ to $\frac{1}{2}$ tola	62.
* Ergot	...	...	...	Dilutric (XI.)	In delayed parturition	$\frac{1}{4}$ to $\frac{1}{2}$ chittack	86.
* Galia	...	Majuphal	...	Stimulant (XVII.)	To check discharges	1 to 3 tola.	
* Gentian	...	...	...	Astringent (V.)	In debility and emaciation	$\frac{1}{4}$ to $1\frac{1}{4}$ tola	29, 33, 27, 28, 29, 41, 42.
* Ginger	...	Adda (root) root dry	...	Tonic (XIX.)	In flatulent distension and colic.	1 to 3 chittacks	3, 15, 16, 21, 24, 28, 32, 41, 42, 82.
				Carminative (VII.)	stimulant XVII.		

Preparation	Properties	Uses	Notes
Black
Castor
Iodine
Sulphate of iron
Acetate of lead
Lime water
Liquor ammoniac
Linseed
Sulphate of Magnesia
Myrrh
Muriatic acid
Mustard
Nitric acid
Nux Vomica
Nitrate of potash
Croton oil
Cocoon oil
Castor oil
Linseed oil
Oil of turpentine
Opium
Opium
Prussic acid
Resin
Rhubarb

NAMES OF DRUGS.		Action.	Use.	Dose.	Reference to prescriptions.
English.	Bengalee.				
* Salt	... Lobun	Purgative (IV.)	In all diseases	½ to 1 seer	22.
* Black or Bay salt	... Karee lobun	Febrifuge (XIV.)	In fevers	½ to 1 chittack	52.
* Soap	... Sabun	Demulcent (IX.)	To make liniments	Not given internally.	
Sulphate of Soda	... ...	Purgative (IV.)	To move bowels	½ to 1 seer.	
Nitrate of silver	... Kastic	Caustic (VIII.)	To burn and destroy growths, &c.	Not given internally	43, 44, 66.
* Starch	... Már	Demulcent (IX.)	To soothe inflamed membranes.	To any amount.	
* Sulphur	... Gundruck	Purgative (IV.)	To open bowels	2 to 4 chittacks	1, 21, 22.
Sulphuric Acid	... Gundruck er drapoc...	Stimulant and tonic (XIX.)	To swollen limbs, &c.	Not given internally	45, 58.
Turpentine (Venice)	... Gundabroga	Stimulant (XVII.)	To foul sores	Ditto	71, 73.
* Treacle	... Dhar	Demulcent (IX.)	To soothe inflamed surfaces...	To any amount	72.
Sulphate of Zinc	... Desta	Astringent (XV.)	To foul sores	Not used internally	64, 69.
Wax	... Mom	Demulcent (IX.)	To make ointment	Not given internally	37, 73.

APPENDIX C.

PRESCRIPTIONS FOR CATTLE DISEASES—Arranged according to the action of the principal ingredient.

The following prescriptions are intended for full grown animals. When administered to younger beasts the dose will be diminished according to age.

Strong and well nourished cattle will stand larger doses than weak and thin animals.

Medicines should generally be administered to cattle in a liquid form: a horn with the sharp end cut, a black bottle or a bamboo, such as is used for holding oil, will be found the best means of administering them. The mouth is held pretty wide open, and the medicine carefully and gradually poured in. If the animal begins to cough the operation should be desisted from till it breathes easily again.

Prescriptions which can be obtained in the bazars are marked by an asterisk.

A few only are given under each Class.

I.—Medicines which improve the condition of a cow and causes it to fatten better on food (alteratives.)

- | | | | |
|--------------------------|-----|-----|-------------------------|
| 1. Sulphur (Grundruk) | ... | ... | $\frac{1}{2}$ chittack. |
| *Black Antimony (soorma) | ... | ... | 1 tolah. |

To make a powder, which is to be given daily in rice water till some improvement appears.

In diseases in which gradual emaciation and derangement of bowels or digestion is prominent

- | | | | |
|------------------------------------|-----|-----|----------------------|
| 2. Mercury and chalk | ... | ... | $\frac{1}{2}$ tolah. |
| Powdered rhubarb (rheu or cheenee) | ... | ... | $\frac{1}{4}$ " |

To make a powder, which is to be given twice a day in one seer of rice water.

Given in similar cases.

- | | | | |
|----------------------|-----|-----|-------------------------|
| *3. Aloe (mosubber) | ... | ... | $\frac{1}{2}$ chittack. |
| Soda (Sargee muttee) | ... | ... | $\frac{1}{2}$ " |
| Dry Ginger (soot) | ... | ... | 1 " |
| Boiling water | ... | ... | $\frac{1}{2}$ seer. |

Give four chittacks in one seer of suttoo and water or rice water on two successive days. When a cow is off its feed with slight constipation, dry skin, and in bad condition.

- | | | | |
|-------------------|-----|-----|-------------|
| *4. Lime (chunna) | ... | ... | 1 chittack. |
| Water | ... | ... | 1 seer. |

Allow this to stand for twenty-four hours. One chittack to be given in rice water or whey every morning.

In wasting with occasional looseness of bowels.

Good in *chronic diarrhea* of calves.

II.—Medicines which relieve pain (anodyne).

- | | | | |
|----------------------------|-----|-----|----------------------|
| *5. Powdered opium (afeem) | ... | ... | $\frac{1}{2}$ tolah. |
| Camphor (kafoor) | ... | ... | 1 chittack. |

To be given in one seer of water or beer.

In any disease accompanied with pain.

Ethereal Tincture.

- | | | | |
|------------------------|-----|-----|--------------|
| 6. Opium (afeem) | ... | ... | 1 chittack. |
| Spirit of nitric ether | ... | ... | 8 chittacks. |

Filter after fourteen days maceration. Dose half to one and a half chittack.

Tincture of Opium (Afeem or Orisht.)

- | | | | |
|------------------|-----|-----|--------------|
| 7. Opium (afeem) | ... | ... | 1 chittack. |
| Spirit | ... | ... | 8 chittacks. |

Filter after four days maceration. Dose half to one and a half chittack.

In water, beer, rice water, &c.

- | | | | |
|-------------------------|-----|-----|-------------------------|
| *8. Indian hemp (bhang) | ... | ... | $\frac{1}{2}$ chittack. |
| Opium (afeem) | ... | ... | $\frac{1}{2}$ tolah. |
| Ginger (soot) | ... | ... | 1 chittack. |

To be given in one seer of water, beer, &c. In colic and painful intestinal disorders.

- | | | | |
|----------------------|-----|-----|-------------------------|
| 9. Tincture of Opium | ... | ... | $\frac{1}{2}$ chittack. |
|----------------------|-----|-----|-------------------------|

(No. 6 or 7.)

Tincture of Aconite 10 to 15 phuttas in Linseed gruel (moshiner boessie) every two hours for dysentery.

- | | | | |
|---------------------------|-----|-----|------------------------|
| 10. Extract of belladonna | ... | ... | $\frac{1}{2}$ tolah. |
| Tincture of aconite | ... | ... | 10 phuttas. |
| Nitre (shora) | ... | ... | 1 $\frac{1}{2}$ tolah. |

To be given twice or thrice a day in inflammatory diseases of the heart.

III. Medicines which relieve spasms (Antispasmodics.)

- | | | | |
|---------------------------|-----|-----|----------------------|
| 11. Extract of belladonna | ... | ... | $\frac{1}{2}$ tolah. |
| Opium (afeem) | ... | ... | $\frac{1}{4}$ " |

Dissolve in one and a half seer of warm water and repeat every four hours in tetanus.

12. Prussic acid (dilute) ... 1 tolah.
Repeated every hour in tetanus.

*13. Aesafetida (hing) ... 1 tolah.
Bhang ... 2 tolahs.
Carraway (jeera) ... 1 chittack.

To be given in one seer of warm water frequently in colic.

14. Capsicum (loncha mirch) ... 1 tolah.
Opium (afeem) ... 15 ruttees.
Aesafetida (hing) ... 1 tolah.

In one seer of warm water frequently in colic and tympanitis.

IV.—Medicines which move the bowels (aperients).

15. Epsom salts ... 4 chittacks.
Powdered ginger (soot) ... 1 tolah.

In a quart of whey, beer, or rice water. In slight febrile diseases.

16. Epsom salts ... 6 chittacks.
Powdered ginger (soot) ... 1 chittack.
Aromatic spirit of ammonia ... 1/2 "
Solution of aloes (mosubber) ... 2 chittacks.

In one seer of whey or rice water.

17. Colomel ... 1 tolah.
Opium ... 15 ruttees.
Linseed oil ... 1 seer.

In inflammatory diseases of the stomach to be repeated every four hours if necessary.

18. Linseed oil ... 1 seer.
Tincture of opium ... 1 chittack.
Sweet spirit of nitre ... 1/2 "

Two catchas to be given to calves twice or thrice a day in chronic diarrhoea.

*Linseed oil (moshiner tel) ... 1 seer.

19. Tincture of opium (afeem er orisht) ... 1 chittack.
A gentle purge for recent diarrhoea.

20. Epsom salts ... 1 seer.
Aromatic spirit of Ammonia ... 1 chittack.
Tincture of opium ... 1 "

A good purgative in colic.

*21. Epsom salts ... 6 chittacks.
Sulphur (gundrack) ... 2 "
Nitre (shora) ... 1 chittack.
Ginger (soot) .. 1/2 "

To be given in one seer of water. A good purge in Gooteo or Puschima.

*22. Sulphur (gundrack) ... 4 chittacks.
Salt (loban) ... 1 seer.
Pepper (golmirch) ... 1 chittack.

To be given in one seer of rice water or linseed boossie and water.

Solution of aloes (mosubber er jol).

23. *Aloes (mosubber) ... 1 chittack.
Soda sugree muttee) ... 1 "
Boiling water ... 8 chittacks.
Dose ... 4 to 6 chittacks.

24. *Croton seeds (joipal er beech) ... 5 ruttees.
Solution of aloes (mosubber er jol) ... 2 chittacks.
Ginger (soot) ... 1 tolah.

A strong purge in febrile disease.

25. *Linseed oil (moshiner tel) .. 1 seer.
Croton oil (joipal er tel) .. 10 phutias.
To be given slowly and repeated if necessary.

26. *Linseed oil (moshiner tel) .. 1 seer.
Oil of turpentine (tarpen tel) ... 2 chittacks.

To be administered slowly in cases of "Fardel bound."

V.—Medicines which check morbid discharges (astringents).

27. *Powdered opium (afeem) .. 10 ruttees.
Chalk (karee muttee) .. 1 chittack
Powdered chiretta or gentian ... 2 tolahs.

To be given in one seer of rice and water or boossie and water.